# P01000092102

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## TRANSMITTAL LETTER

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TO:	Amendment Section		
	Division of Corporations		

SUBJECT: _	CARIBE VAN L	innes of Fl	onidu INC.
	NUMBER: <u>101000</u>		
The enclosed.	Articles of Amendment and fee are	submitted for filing.	
Please return a	all correspondence concerning this	matter to the following:	
	Luis F. VN	1	
	CANIBE UBN (Name of	Firm/Company)	inida INC
	ZIOIW C/AS	S T -	
	City/ State	FC 3 47 4/ e/ and Zip Code)	<u> </u>
Luis i	(Name of Person)	at ( <u>407</u> ) <u><b>9</b>43</u> (Area Code & Daytim	5-7373 e Telephone Number)
Enclosed is a	check for the following amount:		
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is	☐ \$52.50 Filing Fee Certificate of Status Certified Copy

# **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### **Street Address**

enclosed)

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Certified Copy

(Additional Copy is enclosed)



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 26, 2004

LUIS F. VAZQUEZ CARIBE VAN LINES OF FLORIDA INCORPORATED 2101 W. CLAY ST. KISSIMMEE, FL 34741

SUBJECT: CARIBE VAN LINES OF FLORIDA INCORPORATED

Ref. Number: P01000092102

We have received your document for CARIBE VAN LINES OF FLORIDA INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

# Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist
Letter Number: 304A00036902

Articles of Amendment Articles of Incorporation

#### FloridA INCORPORATED CARIBE VAN LiNES

(Name of corporation as currently filed with the Florida Dept. of State)

# PO10000 92102 (Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

#### NEW CORPORATE NAME (if changing):

ıd/	or Article Title(s) being a	mended, added or del	etea: (BE SI	PECIFIC)	
				······································	
_					
		(Attach additional	pages if neces	sary)	····
ar	amendment provides for	exchange, reclassifica	ation, or can	cellation of issued sh ment itself: (if not app	nares, provisio

(continued)

The date of each amendment(s) adoption: 5-19-04.			
Effective date if applicable:			
(no	o more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
· ·	s/were approved by the shareholders. The number of votes cast for ne shareholders was/were sufficient for approval.		
	where approved by the shareholders through voting groups. The ust be separately provided for each voting group entitled to vote adment(s):		
"The number of vo	tes cast for the amendment(s) was/were sufficient for approval by		
	(voting group)		
and shareholder action	were adopted by the board of directors without shareholder action was not required.  were adopted by the incorporators without shareholder action and		
shareholder action was	not required.		
Signed this _/9 day of _M	, 2004.		
selected, l	tor, president or other officer if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)		
2	(Typed or printed name of person signing)		
_ ,	(Typed or printed name of person signing)		
	President (Title of person signing)		
	(Title of person signing)		

FILING FEE: \$35