P03000 115792

(Requestor's Name)	
(Address)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: TRI-COUNTY TE	RANSPORTATION, INC.		
DOCUMENT NUM	BER: P03000115792			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	PERRY J. STAMOS			
		Name of Contact Person		
	TRI-COUNTY TRANSPOR	TATION, INC.		
	Firm/ Company			
	221 W OAKLAND PARK E			
	Address			
	FORT LAUDERDALE, FL 33311			
	City/ State and Zip Code			
	BEVANS@BLSERVICEIN	C.COM		
	-	sed for future annual report	notification)	
For further information	on concerning this matter, plea		565-8900	
Name	of Contact Person	at (<u>954</u> Area Coc) 565-8900 le & Daytime Telephone Number	
	or the following amount made			
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
	. Box 6327		ntre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

TRI-COUNTY TRANSPORTATION, II	NC.		
(Name (of Corporation as currently	v filed with the Florida Dept. of State)	
P03000115792			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this a	Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
	lorp," "Inc," or "Co". A	company," or "incorporated" or the abbreviate 1 professional corporation name must conta	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)			1.001
D. If amending the registered agent an	id/or registered office addi	ress in Florida, enter the name of the	<u>ः</u> अ
new registered agent and/or the new			ĊΠ
Name of New Registered Agent	PERRY J. STAMOS		ω
	221 W OAKLAND PARK	BLVD.	_
	(Florida str	eet address)	_
New Registered Office Address:	FORT LAUDERDALE	Florida 33311	
		(City) (Zip	Codes
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. I am familiar w My J	with and accept the obligations of the position.	_
	Signature of New Re	egistered Agent, if changing	_

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VD	JOHN M. CAMILLO	221 W OAKLAND PARK BLVD
Add			FORT LAUDERDALE, FL 33311
X Remove			
2) Change			
Add			
Remove Change			
Add			/
Remove			
4) Change		/	
Add			
Remove			
5) Change		-/	
Add			
Remove			
6)Change		_	
Add			
Remove			

. If amending or a	dding additional Articles, enter change(s) here:
(Attach additional	I sheets, if necessary). (Be specific)
·	
	
	-/
/	
If an amendmen	t provides for an exchange, reclassification, or cancellation of issued shares,
<u>provisions for i</u>	mplementing the amendment if not contained in the amendment itself:
(if not appli	cable, indicate N/A)
	
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendn	nent file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing epartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors w	ithout shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes caufficient for approval.	ist for the amendment(s)
	proved by the shareholders through voting groups. each voting group entitled to vote separately on to	
"The number of votes cas	for the amendment(s) was/were sufficient for app	roval
by	(voting group)	 ."
Dated	lirector, president or other officer – if directors or o	Ware how not have
select	the ctor, president or other officer – if directors or cond. by an incorporator – if in the hands of a received the fiduciary by that fiduciary)	
	PERRY J. STAMOS	
	(Typed or printed name of person sign	ing)
	R/A	
	(Title of person signing)	-