

P05000010199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

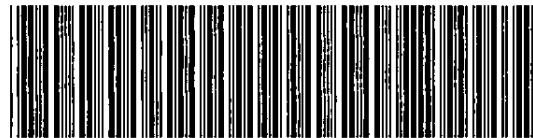
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/07/12--01010--012 **35.00

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
12 DEC -7 AM 10:56

Amend
10 12/7/12

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Jax Cargo Inc.
DOCUMENT NUMBER: P05000010199

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nick Wilmet
Name of Contact Person
Debbie's Accounting Service
Firm/ Company
3575 Southside Blvd
Address
Jacksonville, FL 32216
City/ State and Zip Code
tomcrego@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nick Wilmet at (904) 733-4547
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| ☒ \$35 Filing Fee | ☐ \$43.75 Filing Fee &
Certificate of Status | ☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | ☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC -7 AM 10:36

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

(Document Number of Corporation (if known))

A. If amending name, enter the new name of the corporation:

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent Jody R Fooshe
14476 Duval Pl W, Ste 703
(Florida street address)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|-----------------------|-------------|-------------------------|-------------------------------|
| 1) <u> </u> Change | <u>PS</u> | <u>Donald E. Fooshe</u> | <u>14766 Duval Pl W</u> |
| <u> </u> Add | | | <u>Ste 703</u> |
| <u>X</u> Remove | | | <u>Jacksonville, FL 32218</u> |
| 2) <u>X</u> Change | <u>PS</u> | <u>Jody R Fooshe</u> | <u>14766 Duval Pl W</u> |
| <u> </u> Add | | | <u>Ste 703</u> |
| <u> </u> Remove | | | <u>Jacksonville, FL 32218</u> |
| 3) <u> </u> Change | <u>VT</u> | <u>Sean P. Spillane</u> | <u>3003 Dalehurst Dr W</u> |
| <u>X</u> Add | | | <u>Jacksonville, FL 32277</u> |
| <u> </u> Remove | | | |
| 4) <u> </u> Change | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> Add | | | <u> </u> |
| <u> </u> Remove | | | <u> </u> |
| 5) <u> </u> Change | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> Add | | | <u> </u> |
| <u> </u> Remove | | | <u> </u> |
| 6) <u> </u> Change | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> Add | | | <u> </u> |
| <u> </u> Remove | | | <u> </u> |

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

1

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: December 4, 2012

Effective date if applicable: December 4, 2012
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

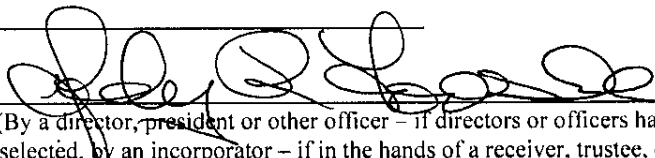
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated _____
Signature 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Jody R Fooshe

(Typed or printed name of person signing)

Vice- President

(Title of person signing)