## P050000 46497

(Re	questor's Name)	
(Ad	dress)	<del></del>
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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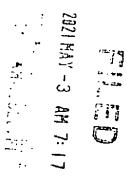


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JUN 24 2021 ! ALBRITTON

## **COVER LETTER**

y. Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company Address City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address

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

TO: Amendment Section

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

(Name of Corporation	on as currently filed with the	Florida Dept. of State)	
P05000046497	<u> </u>	,	
(Docum	nent Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Co</i>	orporation adopts the follow	ring amendment(s
A. If amending name, enter the new name of the co	orporation:		
TeamFreight Corp.			The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered." "professional association," or the abbre	" or "Co". A professional c		
B. Enter new principal office address, if applicable	·:		~-
(Principal office address MUST BE A STREET ADD		. 4 1	2
		*	1
			ω . Ti
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	X)	17.5 1.75	量
[	<del></del>		
			<u> </u>
			•
D. If amending the registered agent and/or register new registered agent and/or the new registered		enter the name of the	
Name of New Registered Agent			<del></del>
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zi	p Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: Lam familiar with and accept t	he obligations of the position	2
i hereny uccept the appointment as registered agent.	r am jamatar wan ana accept i	ne doligations of the position	••
Signo	ature of New Registered Agent,	if changing	
Ţ.	<b>.</b>		
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 Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Saliy Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		<del>_</del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Atta	n <mark>ending o</mark> ch <i>additio</i>	nal sheets	, if necess	ary).	(Be spec	ific)						
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If ar	amend <u>m</u> visions fo	<u>ent provi</u> r implem	des for a	n excha	nge, rec	lassificati	on, or car	ncellation he amend	of issued	shares.		
pro	(if not ap	plicable, i	indicate N	7.4)	<u>anienen</u>	not conti	nico in i	iic amene	men us			
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						<del></del>						

	4/21/2021	
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 amendment file date)	
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 Shirt Nold	<b>и</b> 5 ·	
by	以ら、 (voting group)	
4/26/2021 Dated	- Only	
Signature		
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Raul Fuenmayor	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	<u> </u>