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COVER LETTER

Division of Corporations NAME OF CORPORATION: BUSY BEL Trucking DOCUMENT NUMBER: 20500149906 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Heather Handly
Name of Contact (Rerson Dixii dust 70 yahoo. com For further information concerning this matter, please call: at (239) 233 9474

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 & ☐ \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to

Articles	of	Incorporation
		_ &

	of		A A Ex
BUSG ROD Tru	schina Ti	nc.	10 MAR-5 PM 12:51
(Name of Corporation as currently	filed with the Florid	da Dept. of State)	- PM12:5,
P05000 1499	à L		TALLAMASSEE. FLORIDA
(Document Number o		own)	- CEE. FLORIDA
Pursuant to the provisions of section 607.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this F	Florida Profit Corpoi	
A. If amending name, enter the new name of the	corporation:		
T.O.T Time on Target E	xxedite. Tru	china Inc	The new
name must be distinguishable and contain the wabbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "profession	ord "corporation," gnation "Corp," "In	"company," or "inc," or "c," or "Co". A proj	ncorporated" or the fessional 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 By D. If amending the registered agent and/or registenew registered agent and/or the new registered Name of New Registered Agent:	ered office address	in Florida, enter the	name of the
New Registered Office Address:	(Florida street	address)	
	(City)	, Flor (Zip Code	rida
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent. Signat	I am familiar with a	and accept the obliga	itions of the position.

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
****			Add Remove
	<u></u>	· · · · · · · · · · · · · · · · · · ·	☐ Add ☐ Remove
**************************************			☐ Add ☐ Remove
		onal Articles, enter change(s) here: essary). (Be specific)	
provisi		or an exchange, reclassification, or contained in N/A)	

The date of each amendment(s	s) adoption: $\partial - \partial -$
Totalina data te analizabla.	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) to sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
_	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Signature(By a	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)