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| Em 2 | 4 | 1 | Nddrose: | |
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COR AMND/RESTATE/CORRECT OR O/D RESIGN TWINS TRANSPORT SERVICE, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$35.00 |

APPROVED AND FILEDP. 002

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Articles of Amendment to ticles of Inco

| | of | |
|---|--|--------------------------|
| TWINS TRANSPO | RT SERVICE, INC. | |
| _ | currently filed with the Florida Dept. of State) | ı |
| | P060 <u>0</u> 0042599 | , |
| (Documen | nt Number of Corporation (if known) | |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this Florida Profit Corporation adopts the following | j amendment(s) to |
| A. Hamending name, enter the new na | me of the corporation: | |
| | | The new |
| name thust be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associal | tain the word "corporation," "company," or "incorporated" or the abation "Corp," "Inc," or "Co". A professional corporation name must clion," or the abbreviation "P.A." | breviation ontain the |
| B. <u>Enter new principal office address, i</u> (Principal office address <u>MUST BE A S</u> I | if applicable: TREET ADDRESS) | |
| | | |
| | | |
| C. <u>Buter new mailing address.</u> If applie (Mailing address <u>MAY BE A POST C</u> | CEPICE BOX) | |
| | | |
| | | |
| new registered agent and/or the new | d/or registered office address in Florida, enter the name of the registered office address: | |
| Name of New Registered Agent | FRANKLIN MENENDEZ | |
| 114114 5/ 12/1/20/2012 | 9200 NW 32 COURT | |
| | (Florida street address) | |
| New Registered Office Address: | MIAMI , Florida 33147 | |
| Yew Registered Agent's Signature, if th | (Cip) (Zip Code) | |
| hereby accept the appointment as registe | and agent I am familiar with and accept the obligations of the position | |
| 1 | | |
| Sie | pleate of New Registered Agent, if changing | |
| | | |

Page 1 of 4

| f 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 charge, 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 D | <u>oc</u> | |
|-------------------------------|--------------|----------------|---------------------|------------------|
| X Remove | <u>v</u> | Mike J | ones | |
| X Add | <u>\$Y</u> | <u>Sally S</u> | <u>मांधे</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s |
| 1) Change | PD/S | <u> </u> | LESLIE I MENENDEZ | 9200 NW 32 COURT |
| Add | | | | MIAMI FL 33147 |
| ₹ Remove | | | | |
| 2) Change | P | | FRANKLIN MENENDEZ | 9200 NW 32 COURT |
| Add | | | | MIAMI FL 33147 |
| Remove | | | | |
| 3) Change | | _ | | • |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | . |
| Remove | | | | |
| | | | | , |
| o | | _ | | |
| Add | | | | |
| Remove | | | | |

Page 2 of 4

| Attach additio | r <u>adding additional Articles, outer chance(s) here</u> : nal sheats, if necessary). (Be specific) | |
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| If an amendm | ent provides for an exchange, reclassification, or capcellation of issued shares, r implementing the amendment if not contained in the amendment itself: | |
| (if not ap | plicable, indicate N/A) | |
| RANKLIN | MENENDEZ IS THE OWNER OF THE 100% OF SHARES | |
| · | | _ |
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APPROVED AND FILED

FAX No.

P. 005

13 NOV 27 AM 10: 04

SECRETARY OF STATE TALLAHASSEE, FLORIDA

| The date of each amendment(s) : | doption: 11/01/2013 | , if other than the | | |
|--|---|---------------------|--|--|
| date this document was signed. | | | | |
| Effective date if applicable: | 11/01/2013 | | | |
| | (no more than 90 days after amendment file date) | | | |
| Adoption of Amendment(s) | (CHECK ONE) | | | |
| 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) utilities to approval. | | | |
| | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): | | | |
| "The number of votes can | for the amendment(s) was/were sufficient for approval | | | |
| by | by 100 % | | | |
| | (voting group) | | | |
| The amendment(s) was/were ad action was not required. | opied by the board of directors without shareholder action and shareholder | | | |
| The amendment(a) was/were ad action was not required. | opted by the incorporators without shareholder action and shareholder | | | |
| Signature † | 1/2013) | | | |
| selecte | frector president or other officer — if directors or officers have not been and, by the incorporator — if in the hands of a receiver, trustee, or other court stee fiduciary by that fiduciary) | | | |
| | LESLIE MENENDEZ | | | |
| | (Typed or printed name of person signing) | | | |
| | PRESIDENT | | | |
| | (Title of person signing) | | | |