P06000141168

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



800242224008

12/19/12--01004--029 **35.00



COVER LETTER

TO: Amendment Section

Division of Cor	porations		
NAME OF CORPO	RATION: Gold Trans	port Inc	
MAINE OF COMP	P0600014116	8	
DOCUMENT NUM	BER: 1 0000011110		
The enclosed Article.	s of Amendment and fee are sul	bmitted for filing.	
Please return all corr	espondence concerning this mat	tter to the following:	
	Natacha Ramos		
		Name of Contact Person	
	gold transport inc	}	
		Firm/ Company	
	70 NE 135 ST		
		Address	
	NORTH MIAMI F	L 33161	
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
NATACHA F	RAMOS	at ()
Namo	e of Contact Person	Area Coo	_) de & Daytime Telephone Number
Englosed is a abook t	for the following amount made p	navable to the Florida Dena	rtment of State
Eliciosed is a check i	of the following amount made j	payable to the Florida Depa	tinent 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)
<u>M</u>	ailing Address		<u>Address</u>
Amendment Section		Amendment Section	
Division of Corporations			n of Corporations Building
P.O. Box 6327 Tallahassee, FL 32314			xecutive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



December 20, 2012

NATACHA RAMOS 70 NE 135 ST NORTH MIAMI, FL 33161

SUBJECT: GOLD TRANSPORT INC

Ref. Number: P06000141168

We have received your document for GOLD TRANSPORT INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 112A00030059

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	₩.	GOLD TRANSPORT INC
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following the Articles of Incorporation: A. If amending name, enter the new name of the corporation: "Torp," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A." 3. 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) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)	la Dept. of State)	(Name of Corporation as currently filed with the Flo
A stricles of Incorporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the designation "Corp," "Inc," or "Co". A professional corporation name must or the abbreviation "P.A." A. Enter new principal office address, if applicable: A. Enter new mailing address MUST BE A STREET ADDRESS A. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) A. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: A. Name of New Registered Agent (Florida street address) (Florida street address) (Florida street address) (City) (Zip Code)	man (*) San Carlon San Carlon	P-06000141168
s Articles of Incorporation: If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation." "company," or "incorporated" or the acceptance of the corp.," "Inc.," or "Co.". A professional corporation name must ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)	own)	(Document Number of Corporation (if k
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the of Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must cord "chartered," "professional association," or the abbreviation "P.A." 5. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) 6. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 7. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) (Zip Code)	ida Profit Corporation adopts the following amend	Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flas</i> Articles of Incorporation:
Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) LI amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) (Zip Code)		. If amending name, enter the new name of the corporation:
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent:	. A professional corporation name must contain t	Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent:	Kemann the Ceme	
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) Registered Agent's Signature, if changing Registered Agent:	Remain the Sonne	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
(Florida street address) New Registered Office Address:	n Florida, enter the name of the	. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:
New Registered Office Address:, Florida	man the Dany.	Name of New Registered Agent
(City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent:	dress)	(Florida street
	, Florida(Zip Code)	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	and accept the obligations 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)

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)	Title	Name	<u>Addres</u> s
1) Change	Р	ANDREA MORALES FONSECA	70 NW 135 ST
Add			NORTH MIAMI FL 33161
X Remove			
2) Change	Р	NATACHA RAMOS	70 NW 135 ST
XAdd			NORTH MIAMI FL 33161
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
		,
If an amandment provides for an eval	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
(V		
,		
· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adop	otion:
Effective date if applicable:	12-11-2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement such 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)
	(,o.m.g.g,o.m/)
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder
Dated	<u>/3/20/3</u>
Signature	Chr.
	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court
	I fiduciary by that fiduciary)
_	Anonea Morale Fonsecal
	(Typed or printed name of person signing)
	President
_	(Title of person signing)