## P0700009110

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section . Division of Corporations

| NAME OF CORPORATION: SiB E  | X Press TUC   |
|---|---|
| DOCUMENT NUMBER: P570000  | 0911D   |
| The enclosed Articles of Amendment and fee are subm                   | litted for filing.  |
| Please return all correspondence concerning this matter               | r to the following:   |
| KA-thering l<br>Name of C   |   |
| Transportation Firm/  | Permit Sivc.  |
| 1883 N.W  | 1. 171 St. dress  |
| Hialegh, FL 3 City/ State   | 33015<br>and Zip Code   |
| E-mail address: (to be used for futu                                  | re annual report notification)  |
| For further information concerning this matter, please of             | all:  |
| Name of Contact Person at   | ( <u>786</u> ) <u>253-8654</u><br>Area Code & Daytime Telephone Number  |
| Enclosed is a check for the following amount made pay                 | vable to the Florida Department of State:   |
| Certificate of Status   | \$43.75 Filing Fee & S52.50 Filing Fee Certified Copy Additional copy is enclosed)  \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Amendment Section An  Division of Corporations Div  P.O. Box 6327 Cli | reet Address nendment Section vision of Corporations flon Building 61 Executive Center Circle   |

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation of

|  | X Press                                      | Inc                                  |                                 |
|--|--|--------------------------------------|---------------------------------|
| (Name of Corporation as c  | urrently filed with                          | the Florida Dept. of State           | <u>e)</u>                       |
| POT  | 0000091                                      | 10                                   |                                 |
| <del></del>  | Number of Corporat                           | <del></del>                          | <del></del>                     |
| Pursuant to the provisions of section 607. amendment(s) to its Articles of Incorporation   | 1006, Florida Statut<br>n:                   | es, this <i>Florida Profit C</i>     | prporation adopts the following |
| A. If amending name, enter the new nam   | e of the corporatio                          | <u>n:</u>                            |                                 |
| name must be distinguishable and conta<br>abbreviation "Corp.," "Inc.," or Co.," or<br>name must contain the word "chartered," " | the designation "C                           | orp," "Inc," or "Co". A              | professional corporation        |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR  |  | 16333 Br                             | istol take Cir.                 |
| (Trincipal office duaress MOST BEA STR   | <u>LLI ADDRESS</u> )                         | Orlando, FI                          |                                 |
|  |  | 32                                   | 828 5 7                         |
| C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF   |  | SAMC.                                | FILED -9 AM 9:55 SSEE. FLORIDA  |
| D. If amending the registered agent and/o<br>new registered agent and/or the new r   | or registered office<br>egistered office add | address in Florida, enter            | the name of the                 |
| Name of New Registered Agent:  | Jose A                                       | . Bonilla.                           |                                 |
| New Registered Office Address:   | (Flori                                       | ristol Lake Ci<br>da street address) |                                 |
|  | Orlando (City)                               | FL (Zip (                            | Florida <u>32828</u><br>Code)   |
| New Registered Agent's Signature, if char<br>I hereby accept the appointment as registere  |  |                                      | oligations of the position.     |
| *  | Signature of New                             | w lla. Registered Agent, if change   | zino                            |

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 |
|-------------------|---|--|----------------|
| ND_               | Maria C. Dunn   | 16320 Deer Chase<br>Loop<br>Orlando FL 32828 | Add Remove     |
| <u>P</u>          | Jose A. Bonilla   | UB333 Bristol Lake<br>Orlando FL 32828       | Add Remove     |
|                   |   |  | Add Remove     |
| E. <u>If amen</u> | ding or adding additional Articles, ent                           | <u>er change(s) here</u> :                   |                |
|                   | additional sheets, if necessary). (Be spe                         |  |                |
|                   |   |  |                |
|                   |   |  |                |
| <del>.</del>      |   |  |                |
|                   |   |  |                |
| F. Ifana          | mendment provides for an exchange, r                              | eclassification or cancellation of iss       | ued shares     |
| provisi           | ions for implementing the amendment not applicable, indicate N/A) |  |                |
|                   |   |  |                |
|                   |   |  |                |
|                   |   |  |                |
|                   |   |  | . <u> </u>     |

| The date of each amendment(s) a                              | doption:  |
|--|---|
| FICE ALL DATES TO MANAGES                                    | (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 ad by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amendment(s) ufficient 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   | ing group)  |
| (vot   | ing group)  |
| action was not required.                                     | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder  |
| Dated (o)(o)   | )1  |
| selected,  | rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary) |
|  | Typed or printed name of person signing)  |
|  | (Title of person signing)   |