P07000050553

(Requestor's Name)				
(Address)				
(1001000)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(D	innes Entity Non			
(Bus	iness Entity Nan	nej		
(Document Number)				
/				
Certified Copies	Certified Copies Certificates of Status			
· -				
<u></u>				
Special Instructions to F	iling Officer:			

Office Use Only



600166354396

01/22/10--01020--026 **43.75

ZOIO FEB -8 AM 10: 30
SECRETARY DE STATE

NC

FEB 1 0 2010

COVÊR LETTER

Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Name of Contact Person at (904) 803-1

Area Code & Daytime Teleph Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & Certified Copy □ \$52.50 Filing Fee ☐ \$43.75 Filing Fee & □ \$35 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



January 26, 2010

SAGE FOSTER FOSTER TRANSPORTING, INC. 11732 VC JOHNSON RD JACKSONVILLE, FL 32218

SUBJECT: FOSTERS TRANSPORTING, INC.

Ref. Number: P07000050553

We have received your document for FOSTERS TRANSPORTING, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P99000087275 - FOSTER ENTERPRISES, INC..

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) 245-6925.

Letter Number: 310A00002108

Teresa Brown Regulatory Specialist II

Articles of Amendment to Articles of Incorporation of Name of Corporation as currently filed with the Florida Dept. of State P070005553 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A.: If amending name, enter the new name of the corporatio	<u>n:</u>			
Tosters Enterorises of Joname must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional association and the word "chartered," "professional association to the word "chartered," "professional association and the word "corp."	oration," "company," or "incorporated" or the orp," "Inc," or "Co". A professional corporation			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	O staying the same as below			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	O staying the same " as below			
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: Sale	Foster			
New Registered Office Address: (Flore City)	VC Johnson Rd ida street address) Son Ville Florida 32218 (Zip Code)			
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam Signature of New				

removed a	g the Officers and/or Directors, enter t nd title, name, and address of each Off		
(Attach add	litional sheets, if necessary)		
<u>Title</u>	Name	<u>Address</u>	Type of Action
	& Both are		
	Staying the Same as		☐ Remove
	same as	**************************************	
	1 Septer C		
F If amon	ding or adding additional Articles, ent	er change(s) here:	
	dditional sheets, if necessary). (Be spe		
	7 14		
F. If an a	mendment provides for an exchange, r	eclassification, or cancella	ition of issued shares,
provisi	ons for implementing the amendment	if not contained in the am	endment itself:
(1)	not applicable, indicate N/A)		
	'IA		
	•		
			····

The date of each amendment(s) adoption:
Effective date if applicable: (date of adoption is required) Convort
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated January 20, 2010 Signature 20, 2010
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Sacre Foster (Typed or printed name of person signing)
(Typed or printed name of person signing)
President
(Title of person signing)