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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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14 JUN 13 PM 4: 05

SECRETARY OF STATE
TALL AT A SECRETARY OF STATE

JUN 2 5 2014 T. CARTER

## **COVER LETTER**

TO: Amendment Section

Division of Corporations						
NAME OF CORPO	RATION: WB TRANS	SPORT INC.				
DOCUMENT NUM						
	of Amendment and fee are su	bmitted for filing				
Please return all corre	spondence concerning this mat	tter to the following:				
WALTER BENEVENTANO						
		Name of Contact Persor	1			
	WB TRANSPOR					
		Firm/ Company				
	5455 PIONEER 2					
	OLEWIOTON EL	Address				
	CLEWISTON FL.					
		City/ State and Zip Code	2			
WE	BTRANSPORTING					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call:				
WALTER BE	NEVENTANO	<sub>at (</sub> 561	_, 346 8658			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)			
Mailing Address			Address			
Amendment Section Division of Corporations		Amendment Section Division of Corporations				
	. Box 6327	Clifton Building				

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



WB TRANSPORT INC

14 JUN 13 PM 4: 05

(Name of Corporation as currently filed with the Flo	orida Dept. of State)
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp." "Inc." or Co.," or the designation "Corp," "Inc," or "Cword "chartered." "professional association," or the abbreviation "f	'o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
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 stre	et address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.  gent, if changing

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 Do	<u>oe</u>	
X Remove	V	Mike Jones		
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	Р		WALTER BENEVENTANO	5455 PIONEER 2ND.ST.
Add				CLEWISTON FL. 33440
Remove				
2) Change	V		MIRYAM BENEVENTANO	5455 PIONEER 2ND. ST.
Add				CLEWISTON FL. 33440
Remove				
3) Change				
Add				
Remove				
4) Change	<u> </u>	<del></del>	W-17-12	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	<del></del>			and the second s
Remove				
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	if necessary).	(Be specific)	ge(s) here:		
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If an amendment provid	es for an excha	ange, reclassific	ation, or cancellat	ion of issued sha	res,
If an amendment provid provisions for implement (if not applicable, in	nting the amen	ange, reclassific	ation, or cancellat ntained in the amo	ion of issued sha endment itself:	res,
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provisions for implement	nting the amen	ange, reclassific	ation, or cancellat ntained in the amo	ion of issued sha endment itself:	res,

The date of each amendment(s) adoption: 6/9/2014	, if other than th
date this document was signed.	
Effective date if applicable:	
(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)	
(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 6/10/2014	
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)	
WALTER BENEVENTANO	
(Typed or printed name of person signing)	<del></del>
PRESIDENT	
(Title of person signing)	