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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Accessible T	ransport Inc.	
DOCUMENT NUME	BER: P07000130456		
The enclosed Articles	of Amendment and fee a	re submitted for filing.	
Please return all corre	spondence concerning thi	s matter to the following:	
Natash	a Simon		
	(Name	of Contact Person)	
Acces	sible Transport Inc.		
	(Fir	m/ Company)	
9010 V	Vinged Foot Drive		
		(Address)	
Tallaha	ssee, FL 32312		
	(City/S	tate and Zip Code)	
For further informatio	n concerning this matter,	please call:	
Natasha Simon		at ( <u>856</u> ) <u>655-200</u>	
(Name of	Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	or the following amount:		
☑ \$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 Addr Amendment S Division of Co P.O. Box 6327 Tallahassee, F	ection prporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cit Tallahassee, FL 32301	rcle

## Articles of Amendment to Articles of Incorporation of

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Accessible Transport Inc.

(Name of corporation as currently filed with the Florida Dept. of State) AHASSEE, FLORIDA

P0700013	0456
<del></del>	(Document number of corporation (if known)
	endment(s) to its Articles of Incorporation:
NEW CORPORATE N	AME (if changing):
N/A	
Must contain the word "corporation management of the corporation of th	oration," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") nust contain the word "chartered", "professional association," or the abbreviation "P.A.")
	PTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) ing amended, added or deleted: (BE SPECIFIC)
Article II (amended)	Place of Business: 327 Office Plaza Drive Suite 104
	Tallahassee, FL 32301
Mailing address of th	e corporation is: 1400 Village Square Blvd Unit 3 Box 215
	Tallahassee, FL 32312
Article VII (add)	Title: Managing Officer
	Kelvin Ellis
	3124 Hawks Landing Drive
	Tallahassee, FL 32309
	(Attach additional pages if necessary)
If an amendment provide for implementing the am	es for exchange, reclassification, or cancellation of issued shares, provisions endment if not contained in the amendment itself: (if not applicable, indicate N/A

(continued)

The date of each amendment(s) adoption: February 18, 2008
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
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)
Natasha Simon
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35