P08000018344

(Re	equestor's Name)	,
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	⇒ #)
PICK-UP	☐ WAIT	MAIL.
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	 	





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EL OF SIATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	MOVING EX	PRESS VAN LINE COR	P
DOCUMENT NUMBER:	P08000	018344	
The enclosed Articles of Amenda	ment and fee are su	bmitted for filing.	
Please return all correspondence	concerning this ma	tter to the following:	
	LESTE	R LEIVA	
		Name of Contact Per	son
	MOVINI	C EVERECO MAN LINE	CORR
-	WOVING	G EXPRESS VAN LINE Firm/ Company	CORP
			<u></u>
_	9725 FC	NTAINEBLEAU BLVD A	APT A211
		Address	
	MIAMI, F	EL 33172	
		City/ State and Zip C	ode
	dmoreno@)simplexgroup.net	
E-ma		sed for future annual repo	ort notification)
For further information concerning	ng this matter, pleas	000	₎ 409-1467
Name of Contact	Person		Code & Daytime Telephone Number
Enclosed is a check for the follow			•
	.75 Filing Fee & tificate 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 Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Ame Divi Clift 2661	et Address Indiment Section Is sion of Corporations In Building Executive Center Circle Is shassee, FL 32301

Articles of Amendment Articles of Incorporation

MOVING EXPRESS VAN LINE CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000018344		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida 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 "C word "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must c	breviation ontain the
B. Enter new principal office address, if applicable:	9725 FONTAINEBLEAU BLVD APT A211	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33172	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9725 FONTAINEBLEAU BLVD APT A211	01V18
	MIAMI, FL 33172	YISION OF CORPORATIONS 12 DEC -7 NH 10: 30
		- 1 COS
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	7 HH 10: 30
Name of New Registered Agent	A STATE OF S	0 %
(Florida stree	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 with the signature of New Registered Agent.		

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		4114144	
Add			Abstract Control of the Control of t
Remove			
3) Change			
Add			
Remove			A Lambarda
4) Change			
Add			AL DEAL AND ADMINISTRATION OF THE PROPERTY OF
Remove			
5) Change			
Add			1.000 (74)
Remove			
6) Change			- L-VIPAGENIE-
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
In additional states and all the second	
44.500	
. If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
•	

The date of each amendment(s)	adoption: 12/04/2012
Effective date <u>if applicable</u> :	12/04/2012 (no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated12/0	4/2012
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	LESTER LEIVA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)