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SECRETAIN, OF STATE

2024 SEP 30 PM 8: 0



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: QUALITY]	ransportation_	Services Inc.	
DOCUMENT NUME	BER: <u>P08000</u>	025026		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
,	mahirene@qualit	Name of Contact Person	1	
		Firm/ Company		
	1380 SW	Import Driv	e #101	
	Port St Lui	City/ State and Zip Cod	<u>53</u>	
		City/ State and Zip Cod	e	
	mahirene le	Caralitytsi sed for future annual report	.Com	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Mahirene F	Pexez	at (954		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ling Address	Street Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

auality Transportation Serv	ices Inc.
(Name of Corporation as currently	filed with the Florida Dept. of State)
(Document Number of C	Corporation (if known) 2024 SEP 30 PM 8: 37
Pursuant to the provisions of section 607,1006, Florida Statutes, this FI its Articles of Incorporation:	orida 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," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp"
B. Enter new principal office address, if applicable:	1380 Sw Import Dr # 101
(Principal office address MUST BE A STREET ADDRESS)	Port St Lucie, FL 34953
C. Enter new mailing address, if applicable:	1290 Sw Tana & D/ (1/m)
(Mailing address MAY BE A POST OFFICE BOX)	1380 Sw Import Dr #101
	Port St Lucie, FL 34953
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stree	t address)
M. B. Co. LOW on Allennia	. Florida
New Registered Office Address:	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and account the obligations of the position
Thereny accept the appointment as registered agent. I am jamitan wi	in the accept me orniganous of the position.
Signature of New Reg	gistered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doe				
X Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Nam</u>	<u>e</u>		<u>Addres</u> s	
1) Change		_				
Add						
Remove						
2) Change				<u>. </u>		
Add						
Remove 3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change		<u> </u>				
Add						
Remove						
6) Change						
Add						
Remove						

	ary). (Be specific)			
				
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f an amendment provides for an provisions for implementing the (if not applicable, indicate No	e amendment if not	ication, or cancellati contained in the ame	on of issued shares ndment itself:	ia.
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provisions for implementing the	e amendment if not	ication, or cancellaticontained in the ame	on of issued shares	

The date of each amendment(s) a date this document was signed.	adoption:, if other than the
Effective date <u>if applicable</u> :	9-24-24
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date will not be listed as the department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were ap must be separately provided for	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	Mahirene Perez
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)

the

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