

PO8000080005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

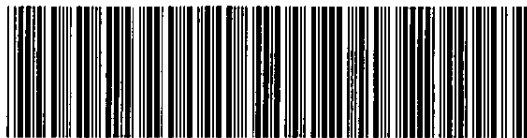
(Document Number)

Certified Copies _____

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05/04/09--01033--007 **36.00

Amend

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAY 26 AM 10:20

T. Roberts MAY 27 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2009

CHARLES COMMANDER
INTREPID TRANSPORTATION
2243 VAN BUREN ST
HOLLYWOOD, FL 33020

SUBJECT: INTREPID TRANSPORTATION INC
Ref. Number: P08000080005

We have received your document for INTREPID TRANSPORTATION INC and your check(s) totaling \$36.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Upon receipt of your letter and/or check(s) totaling \$36.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 909A00015705

RECEIVED
2009 MAY 26 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



INTREPID TRANSPORTATION

2243 Van Buren Street

Suite 2

Hollywood, FL 33020

Tel/Fax 1-888-633-4449

To: FLORIDA DEPARTEMENT OF STATE - DIVISION OF CORPORATIONS
From: Charles Commander – President: INTREPID TRANSPORTATION, INC.
Date: Tuesday, April 21, 2009
Re: Change of Address – Dismissal of Vice-president; Luis Quintero

Dear Sir/Madam:

Please change the address of the corporation to:

2243 Van Buren Street
Suite 2
Hollywood, FL 33020

Additionally,

Please remove LUIS QUINTERO from his position as Vice-President, he has been dismissed from this position.

Regards,

Charles Commander – President
INTREPID TRANSPORTATION INC.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Intrepid Transportation Inc.

DOCUMENT NUMBER: P08000080005

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles Commander

Name of Contact Person

Firm/ Company

2243 Van Buren Street, Suite 2

Address

Mollywood, FL 33020

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Commander

Name of Contact Person

at (786) 444-5071

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

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

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Intrepid Transportation Inc

09 MAY 26 AM 10:20

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

PO 80000 800005

(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 corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

2243 Van Buren Street
Suite 2
Hollywood, FL 33020

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

2243 Van Buren Street
Suite 2
Hollywood, FL 33020

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:

New Registered Office Address:

_____ (Florida street 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 and accept the obligations of the position.

Signature of New Registered Agent, 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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------|----------------|--|
| VP | Luis Quintero | | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 3/26/09

Effective date if applicable: 3/26/09
(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 _____

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)

Charles Commander

(Typed or printed name of person signing)

President

(Title of person signing)