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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

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OR AMND/RESTATE/CORRECT OR O/D RESIGN

NON-STOP AUTO TRANSPORT, INC.

| Certificate of Status | 0 |
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Corporate Filing Menu

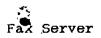
Help

Articles of Amendment to Articles of Incorporation

| Non-Stop A | urrently filed with the Florid | a Dept. of State) | |
|---|--|----------------------------------|--------------------------------------|
| | Number of Corporation (if kno | own) | |
| Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation | 006; Florida Statutes, this F | lorida Profit Corporation add | opts the following |
| A. If amending name, enter the new name | e of the corporation: | | |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "p | the designation "Corp," "Inc | " or "Co". A professional e | The new ed" or the corporation |
| B. Enter new principal office address, if a (Principal office address MUST BE A STRE | | onwaa No | 1y 5522 |
| C. Enter new mailing address, if applicable (Mailing address MAX BE A POST OF) | | | 09 JUL 28 SECRETAR TALLAHASS |
| D. If amending the registered agent and/or new registered agent and/or the new re | r registered office address in gistered office address: |) Florida, enter the name of t | 28 AMIO RYOFSTA SEE, FLOR |
| Name of New Registered Agent: | | | 07 ADE |
| New Registered Office Address: | (Florida street a | ddress) | |
| | (City) | , Florida(Zip Code) | ********** |
| New Registered Agent's Signature, if change I hereby accept the appointment as registered | ging Registered Agent: lagent. I am familiar with an | nd 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) Title <u>Name</u> Address Type of Action □ Add ☐ Remove □ Add ☐ Remove ☐ 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 concellation 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: |
|---|
| Effective date if applicable: (no more than 90 days after amendment file date) |
| (no more than 20 days after amenament 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 count appointed fiduciary by that fiduciary) |
| (Typed or printed name of person signing) |
| (Title of person signing) |



7/29/2009 3:48:08 PM PAGE 1/004 Fax Server

i sent this over on 7/28 but our server was down and not sending out docs. Can you please give the date of 7/28. Thanks