

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000043383 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : PAUL SALVER, P.A.

Account Number : 120020000087

Phone : (954)389-1333

Fax Number

: (954)389-1397

\*\*Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please. \*\*

 Balalana a a .			

COR AMND/RESTATE/CORRECT OR O/D RESIGN TEMMA FREIGHT LOGISTICS, INC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe



## Articles of Amendment to Articles of Incorporation of

## TEMMA FREIGHT LOGISTICS, INC.

(Name of Corporation as currently filed with the Flor	rida Dept, of State)
P090008669	0
(Document Number of Corporation (if k	(nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $FR$ 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," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	t address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent. I am familiar wit	th 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)

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> <u>Jo</u>	hn Doe	
X Remove	<u>v</u> <u>m</u>	ike Jones	
X Add	<u>sv</u> <u>Sa</u>	Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	, <u>D</u>	ORIO A. TESI	8372 NW BETH STREET MIAMI, FL 33166
Remove			<b>2. 20.24.</b>
2) Change Add Remove	<u></u>		
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	<del></del>		

attach additional	lding additional Art sheets, if necessary).	(Be specific)	<u></u>		
				<del>-</del>	
	,				
AND 444					
···					•
					***
provisions for im	provides for an exchaplementing the ame able, indicate N/A)	nange, reclassifica ndment if not cor	ition, or cancella	tion of issued sha endment itself:	ires,
		<u></u>			

The date of each amendment(s) ad	loption: 2/14/12
Effective date <u>if applicable</u> : 2/1	14/12
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	pied by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval
by	h
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.  Contact the second section was not required.	opted by the incorporators without shareholder action and shareholder
Dated X.	74 (49)/2
salocità	irector, president or other officer - if directors or officers have not been the an incorporator - if in the hands of a receiver, trustee, or other court led figuring by that fiduciary)
,	GREGORIO FARFAN
·	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of negan signing)

.: :