## P10000014698

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: O Transpor	t Inc.		
DOCUMENT NUMBER: _	P10000014	698		
The enclosed Articles of Ame	endment and fee are su	bmitted for filing		
Please return all corresponder	nce concerning this man	ter to the followi	ng:	
<del></del>	Os	car Lopez Name of Cont	not Porcon	<del>-</del>
		name of Cont	act rerson	
	0Ţ	ransport Inc.		
		Firm/ Cor	mpany	
	9737	NW 41 ST. SUI	TF 911	
Address				
	Doral	, FL 33178		
<del>-</del> -		City/ State and	l Zip Code	
	dmoreno@simplexg	roup.net		
E-	-mail address: (to be us	ed for future ann	ual report n	otification)
For further information conce	erning this matter, pleas	e call:		
Oscar Lopez		at (	786	) 537-1571
Name of Cont	act Person	, , , , , , , , , , , , , , , , , , ,		c & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made p	payable to the Flo	orida Depar	tment of State:
	\$43.75 Filing Fee & Certificate of Status		ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ao Amendmen Division of P.O. Box 6 Tallahassee	t Section Corporations 327		Division Clifton I	nent Section of Corporations

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

O Fransport Inc.	
(Name of Corporation as currently filed with the Fl	orida Dept. of State)
P10000014698	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida 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 "(word "chartered," "professional association," or the abbreviation "(word)".	n," "company," or "incorporated" or the abbreviation  Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	9737 NW 41 ST. SUITE 911
	Doral, FL 33178
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	F <sub>1</sub>   C1 16
	9737 NW 41 ST. SUITE 911
	Doral, FL 33178
D. If amending the registered agent and/or registered office address:	
Name of New Registered Agent	
9737 NW 41 ST. SUITE	The state of the s
New Registered Office Address: Doral (City)	, Florida33178 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	with and accept the obligations of the position.
Signature of New Registered A	lgent, 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>	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) X Change	Р	Oscar Lopez	9737 NW 41 ST. SUITE 911
Add			Doral, FL 33178
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Channa			
4) Change Add			
Add			
Kemove			
5) Change	<del> </del>		
Add			
Remove			
6) Change			
Add		<del>_</del> <del></del>	
Remove			

Attach additional sheets, if necessary).	<u>cles, enter change(s) here</u> : (Be specific)
<del></del>	
<del></del>	
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis of the angendment itself:
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provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	
Effective date if applicable:	10/11/12
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendment(s) or approval.
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):
"The number of votes cast for the an	nendment(s) was/were sufficient for approval
by	voting group) "
ľ	voling group)
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	he incorporators without shareholder action and shareholder
Dated 10/11/12 Signature	
Signature Way	how
(By a director, preselected, by an in	resident of other officer – if directors or officers have not been neorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)
	O SCAT LO pes (Typed or printed name of person signing)
<del></del>	(Typed or printed name of person signing)
	President
<del></del>	(Title of person signing)