

10/22/2011 16:50

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RAFAEL MOREL CPA PA

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Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : MIT PRODUCTS AND SERVICE, INC.
Account Number : 070402002741
Phone : (305) 677-3781
Fax Number : (305) 433-7300

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

Email Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 OCT 24 AM 10:26

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COR AMND/RESTATE/CORRECT OR O/D RESIGN
TRANSTAR LOGISTICS SERVICES CORP

Certificate of Status	0
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Page Count	04
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October 21, 2011

FLORIDA DEPARTMENT OF STATE

Division of Corporations

TRANSTAR LOGISTICS SERVICES CORP
1901 SW 162ND AVE
MIRAMAR, FL 33027US

SUBJECT: TRANSTAR LOGISTICS SERVICES CORP
REF: P10000025573

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please show address for Cesar A. Cahua.

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

FAX Aud. #: H11000253368
Letter Number: 211A00024128

RECEIVED

11 OCT 24 AM 8:01

REGULATORY SPECIALIST II
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TRANSTAR LOGISTICS SERVICES CORP

DOCUMENT NUMBER: P10000025573

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

Please return all correspondence concerning this matter to the following:

JENY CAHUA

Name of Contact Person

TRANSTAR LOGISTICS SERVICES CORP

Firm/ Company

1901 SW 162 AVENUE

Address

MIRAMAR, FLORIDA 33027

City/ State and Zip Code

JYNNYC@transtartrucking.com

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

For further information concerning this matter, please call:

JENY CAHUA

Name of Contact Person

at ()

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

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Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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Articles of Amendment
to
Articles of Incorporation
of

TRANSTAR LOGISTICS SERVICES CORP

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

P10000025573

(Document Number of Corporation (if known))

FILED
11 OCT 24 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

TRANSPORT LOGISTICS SERVICES CORP

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**)

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 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)

(City)

Florida

(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

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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>
P	CESAR A CAHUA	1901 sw 162 Avenue Miramar, FL 33027	☐ Add ☒ Remove
P	JENY CAHUA	1901 SW 162 AVENUE MIRAMAR, FLORIDA 33027	☒ Add ☐ Remove
			☐ Add ☐ 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)

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The date of each amendment(s) adoption: OCTOBER 3, 2011

(date of adoption is required)

Effective date if applicable:

(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 10-12-11

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)

JENY CAHUA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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