## P10000049683

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SECRETARY OF STATE TALLAHASSEE.FLORID,

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: NOTIONAL N	an lines of Florida INC				
DOCUMENT NUMBER: P100004	9683				
The enclosed Articles of Amendment and fee are submit	ted for filing.				
Please return all correspondence concerning this matter t	o the following:				
AShton Roedel Name of Con	ntact Person				
National Van Lines	of Florida INC				
5781 SW 88 terrace					
Cooper City FL, 3	3328 d Zip Code				
Ashton Roedele Janoo. com E-mail address: (to be used for fiture annual report notification)					
For further information concerning this matter, please ca	II:				
Ashton Roedel at (	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made paya	ble to the Florida Department of State:				
Certificate of Status C	3.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status Certified Copy (Additional Copy is enclosed)				
Amendment Section Ame Division of Corporations Divi P.O. Box 6327 Clift	et Address Indment Section Ission of Corporations Industry Security Center Circle				

Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation

of

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National Van		of flori	da In	G 31 PM 2:55
(Name of Corporation as curre	ently filed with t	<u>he Florida De</u>		TO A TOW OUT STATE
	04969	Y	SECK TALLA	ETARY OF STATE HASSEE, FLORIDA
(Document Nun	nber of Corporation	on (if known)	<b>V</b>	
Pursuant to the provisions of section 607.1000 amendment(s) to its Articles of Incorporation:	6, Florida Statute	es, this <i>Florid</i>	a Profit Corpoi	ration adopts the followin
4. If amending name, enter the new name of	f the corporation	<u>ı:</u>		
mame must be distinguishable and contain a abbreviation "Corp.," "Inc.," or Co.," or the	the word "corpo	oration," "co		
name must contain the word "chartered," "pro				
B. Enter new principal office address, if app		5781 S	W 88+h	terrace
Principal office address <u>MUST BE A STREE</u>	TADDRESS)	Cooper	CHY FI	Lorida
		3332	8	<del></del>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)				
D. If amending the registered agent and/or r new registered agent and/or the new regis			orida, enter the	name of the
Name of New Registered Agent:	<u></u>			
New Registered Office Address:	(Floric	la street addre	ess)	
			, Flor	rida
	(City)		(Zip Code	
New Registered Agent's Signature, if changing the hereby accept the appointment as registered a			ccept the obliga	tions of the position.
	Signature of New I	Registered Age	ent, if changing	<u> </u>

The date of each amendment(s) adoption: 11104 26, 7011		
Effective date if applicable:	(date of adoption is required)	
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
1	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	May 21e, 2011 Ashen Roed	
Signature		
selec	a director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Ashton Roecle/ (Typed or printed name of person signing)	
	(Title of person signing)	