P10000051161

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FEB 2 2 2016

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TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N:R 8	M CARRIER OF	AMERIC	A INC
DOCUMENT NUMBER: _	P100000	P10000051161		
The enclosed Articles of Ame	ndment and fee are su	bmitted for filing		
Please return all corresponden	ce concerning this man	tter to the followi	ng:	
		ALAN MARTIN	IEZ	
		Name of Cont	act Persor	1
		SIMPLEX	GROUP	
	-	Firm/ Cor	npany	
		5800 NW 74	TH AVE	
		Addre	ess	
		MIAMI, FL	33166	
		City/ State and	l Zip Code	
		amartinez@simp	olexgroup.	net
E-	mail address: (to be us	sed for future ann	ual report	notification)
For further information conce	rning this matter, pleas	se call:		
ALAN MARTINEZ / SIMP	PLEX GROUP	at (305	599-8287
Name of Contact Person			Area Co	de & Daytime Telephone Number
Enclosed is a check for the fol	lowing amount made	payable to the Flo	orida Depa	artment of State:
	\$43.75 Filing Fee & Certificate of Status		p <u>y</u>	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee	Section Corporations 327		Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

R & M CARRIER OF AMERICA INC

(Name of Corpo	ration as currently	filed with the Florida Dept.	of State)		
	P10000051161				
(Do	cument Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Floots Articles of Incorporation:	orida Statutes, this F	Iorida Profit Corporation ado	pts the fo	llowing amen	dment(s) to
A. If amending name, enter the new name of th	e corporation:				
DOG ROAD AUTO CARRIER IN				The	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association." or	Corp," "Inc," or "C	Co". A professional corporati	ated" or on name	the abbrevio must contain	ition the
B. Enter new principal office address, if application	able:	11940 SW 186TH	ST		
(Principal office address <u>MUST BE A STREET</u> A		MIAMI, FL 33177	MIAMI, FL 33177		<u> </u>
					_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	11940 SW 186TH ST			
		MIAMI, FL 33177			
D. If amending the registered agent and/or registered registered agent and/or the new registered.			of the		
Name of New Registered Agent	11940 SW 186				
	(Florida stre				
New Registered Office Address:	MIAMI	·	Florida	33177	
New Regimerea Office Address.		(City)	101.04	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age.	nt. I am familiar w	- Marelon	of the PHASSEE	FEB 21	
	Signature of New Re	egistered Agery, if changing	FLORID	: :: ::	Ö

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 Doe	
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) Change	P	PEREZ, REYNALDO	6024 SW 8 ST LOT D 424 MIAMI, FL 33144
Add			
X Remove			
2) Change	Р	MOREJON, MARTHA	11940 SW 186TH ST
× Add			MIAMI, FL 33177
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		
Add			
Pamaya			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	
		
		-
		
······		
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		_

The date of each amendment(s) ad	option:2/1/17	, if other than the
tate this document was signed.		
Effective date <u>if applicable</u> :	• • • •	
	(no more than 90 days after amend	ment file date)
lote: If the date inserted in this blocument's effective date on the Dep		g requirements, this date will not be listed as th
doption of Amendment(\$)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	eted by the shareholders. The number of votes can diction for approval.	ast for the amendment(s)
	oved by the shareholders through voting groups. ach voting group entitled to vote separately on t	
"The number of votes east f	or the amendment(s) was/were sufficient for appa	rovál
by		
	(voting group)	
The amendment(s) was/were adoption was not required.	ted by the board of directors without shareholde	r action and sharcholder
The amendment(s) was/were adoption was not required.	ted by the incorporators without shareholder act	ion and shareholder
Dated 2/	1/17	
Signature	Martha Monofo	24.
selected	ector, president or other officer – if directors by by an incorporator – if in the hands of a receive d fiduciary by that fiduciary)	officers have not been r. trustee, or other court
_	MARTHA MOREJON	
_	(Typed or printed name of person sign	ing)
	PRESIDENT	
-	(Title of person signing)	