

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6366

From:

Account Name : KV CARRIER SERVICE INC.  
Account Number : I20080000029  
Phone : (305) 883-6262  
Fax Number : (305) 883-6605

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

Email Address: \_\_\_\_\_

COR AMND/RESTATE/CORRECT OR C/D RESIGN  
LCH TRANSPORT CORP.

|                       |     |    |
|-----------------------|-----|----|
| Certificate of Status |     |    |
| Certified Copy        |     |    |
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| Estimated Charge      | \$3 | 00 |

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Corporate Filing Menu

Help

*Amend*  
*ASL*  
*8/10/10*

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: LCH TRANSPORT CORP

DOCUMENT NUMBER: P10000053915

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

Please return all correspondence concerning this matter to the following:

OLGA MORGADO

Name of Contact Person

KV CARRIER SERVICES INC

Firm/ Company

11790 NW SOUTH RIVER DR

Address

MEDLEY, FLORIDA 33178

City/ State and Zip Code

KVCARRIERSERVICES@GMAIL.COM

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

For further information concerning this matter, please call:

OLGA MORGADO

Name of Contact Person

at ( 305 ) 883-6262

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

Street Address

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

Articles of Amendment  
to  
Articles of Incorporation  
of

LCH TRANSPORT CORP.

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

P10000056945

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1005, 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:

*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.," if 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)

829 SW 158 TERRACE

PEMBROKE PINES

FLORIDA, 33027

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

829 SW 158 TERRACE

PEMBROKE PINES, FLORIDA 33027

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:

RIVAS, AILIE E

New Registered Office Address:

829 SW 158 TERRACE

(Florida street address)

PEMBROKE PINES

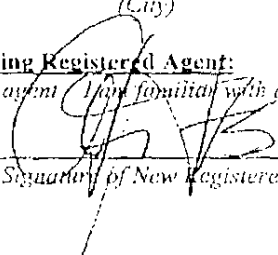
(City)

Florida 33027

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and am familiar with and accept the obligations of the position.

  
Signature of New Registered Agent (if changing)

If amending the Officers and/or Directors, enter the line 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            | OTALORA, MARTA LUCIA | 4305 SW 112 AVE<br>MIAMI, FLORIDA 33165           | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| P            | RIVAS, ALLIE E       | 820 SW 156 AVE<br>PEMBROKE PINES<br>FLORIDA 33027 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                      |                                                   | <input type="checkbox"/> Add<br><input type="checkbox"/> 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)

The date of each amendment(s) adoption: 08/04/2010

(date of adoption is required)

Effective date if applicable: 08/04/2010

(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 and against the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting group. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

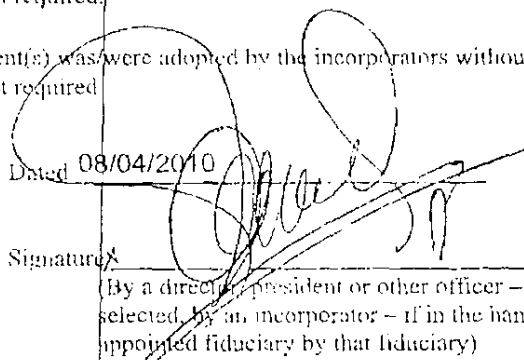
"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_"

(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action or shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 08/04/2010Signature 

(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)

MARTA LUCIA OTALORA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)