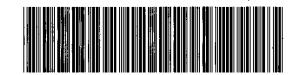
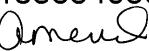
P10000058151

' ×
, (Requestor's Name)
(Address)
(Audress)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000183634080



08/20/10--01027--025 **10.00

08/04/10--01018--016 **25.00



400189,06392,00671

8/20/10



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2010

Ziad Mushen R @ Z Auto Transport, Inc. 1030 Paces Circle #308 Apopka, FL 32703

SUBJECT: R @ Z AUTO TRANSPORT, INC.

Ref. Number: P10000058151

We have received your document for R @ Z AUTO TRANSPORT, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 510A00019006



COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: RCZ	AUTO TRANSPORT, INC.
DOCUMENT NUMBER: \$\int 10000	058151
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	atter to the following:
- RANDA Name	or Contact Person
Rez Aut	TRANSPORTATION, NC.
, , , , , , , , , , , , , , , , , , ,	irm/ Company
1030 PAC	LES CIRCLE # 308
	Address
APOPKA	FL 32703 State and Zip Code
4	State and Zip Code (Ann Ail Con) r future annual report notification)
For further information concerning this matter, ple	ase call:
ZIAD MUSHEN Name of Contact Person	at (<u>407</u>) <u>369 - 3781</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	, ,
/	
▼ \$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy 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

FILED

of	
ROZ AUTO TRANSPORT, INC. 2018 AUG 20 PM 1:54	
(Name of Corporation as currently filed with the Florida Dept. of State) COFTARY OF STATE	
(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE SECRETARY OF STATE TALLAHASSEE, FLORIDA	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follow amendment(s) to its Articles of Incorporation:	ring
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". 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) APOPKA, FL 32 703	308
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1030 PACES CRCE # 308 PPOPKA, FL 32703	:
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: RANDA ALZIN	
New Registered Office Address: 1030 PACES CIRCLE # 308 (Florida street address)	
<u>ΑΡορκΑ</u> , Florida <u>33 703</u> (City) (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.	
RAFELL -	
Signature of New Registered Agent, 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)

Title .	Name	Address ,	Type of Action
<u>P5D</u>	BILAL ELSHAER	617 GREENBRIAR BLY ALTAMONTE SPRING FL 32714	Add Remove
<u>PSD</u>	RANDA ALZIN	1030 PACES C.R. #308 APOPKA, FL 32703	🛛 Add
<u>PS</u> _	ZAID MUSHEN	1030 PACES C.R. #308 APOPKA, FL 32703	Add Remove
	RANDA ALZIN		Lemove
(attach addit	ional sheets, if necessary). (Be specific	:)	
	dment provides for an exchange, recla for implementing the amendment if no		
	applicable, indicate N/A)	of Contained in the amendment	iseii.
	N/A		
			· ·

The date of each amendmen	t(s) adoption: 8-16-10		
	(unit of adoption is required)		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
6 * 1 *	e e e e e e e e e e e e e e e e e e e		
Adoption of Amendment(s)	(CHECK ONE)		
	ere adopted by the shareholders. The number of votes cast for the amendment(stere sufficient for approval.		
• • • • • • • • • • • • • • • • • • • •	ere approved by the shareholders through voting groups. The following statement of the following 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)		
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder		
Dated	8-16-10		
(B	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)		
	(Typed or printed name of person signing)		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		