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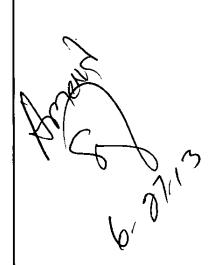
(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	·
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	





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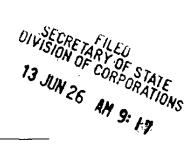
COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION:	TRANSCORP TRANSPORT SOLUTIONS INC
DOCUMENT NUMBER:	P10000061575
The enclosed Articles of Amendment	and fee are submitted for filing.
Please return all correspondence conce	rning this matter to the following:
	ANTOLIN RIZO
	Name of Contact Person
	TRANSCORP TRANSPORT SOLUTIONS IN
	Firm/ Company
	4411 W HANNA AVE
	Address
	TAMPA FL 33614
	City/ State and Zip Code
መልመ ነገ ለተነ	AT TEVED AND DODE FACMATI COM
	ALITYTRANSPORT55@GMAIL.COM ress: (to be used for future annual report notification)
	,
For further information concerning thi	s matter, please call:
ANTOLIN_RIZO_	at (813 600 0397
Name of Contact Perso	n Area Code & Daytime Telephone Number
Enclosed is a check for the following	mount made payable to the Florida Department of State:
	iling Fee & S43.75 Filing Fee & S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	
Division of Corpora P.O. Box 6327	tions Division of Corporations Clifton Building
Tallahassee, FL 323	• • • • • • • • • • • • • • • • • • •

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



TRANSCORP TRANSPORT SOLUTIONS INC

(Name of Corporation as currently filed with the	Florida Dept. of State)
P10000061575	
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation" (Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association." or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida st	reet uddress)
New Registered Office 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 Signature of New Registered	with and accept the obligations of the position.
Signature of New Registered .	agent, ij enunging

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	ANTOLIN RIZO	4411 W HANNA AVE
Add			TAMPA FL 33614
X Remove			
2) Change	P	DANIA ABRAHANTES	4411 W HANNA AVE
X Add			TAMPA FL 33614
Remove			
3) Change	<u> </u>	-	
Add			<u></u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Arti- ttach additional sheets, if necessary).			
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·			
an amendment provides for an exch	ange, reclassification,	or cancellation of	f issued shares,
orovisions for implementing the ame (if not applicable, indicate N/A)	nament ii not contain	ed in the amendm	ent itsen:
, , , , , , , , , , , , , , , , , , ,	,		
			· · · · · · · · · · · · · · · · · · ·
			

The date of each amendment(s) a	doption:	6/23/2013
Iffective date if applicable:	06/23/2013	l (
<u></u>	(no more than 90	days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s		number of votes east for the amendment(s)
		ough voting groups. The following statement wote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were	e sufficient for approval
by	(voting group)	
	(voting group)	
action was not required. The amendment(s) was/were adaction was not required.		out shareholder action and shareholder
Dated	6/23/2019	
select	director president or other office ed, by an incorporator – if in the nted fiduciary by that fiduciary)	eer – if directors or officers have not been the hands of a receiver, trustee, or other court
	Autolia	1 Rayso
	(Typed or printed n	name of person signing)
	r-	
	(Title of person	signing)