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AMUNDA MINDE MINDE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	PORATION: Mount Zio	n Transport, Inc	
DOCUMENT NU	MBER:P10000070	0725	
The enclosed Artic	les of Amendment and fee a	re submitted for filing.	
Please return all co	rrespondence concerning thi	s matter to the following:	
_		Ebson Silva Dias	
	Carl N	ame of Contact Person	<del></del> _
,			
i		Firm/ Company	
	2814 11th ST SW	1	
		Address	
	LEHIG	SH ACRES, FL 33976	
	C	ity/ State and Zip Code	
	diontero@simplexgroup E-mail address: (to be use	o.net d for future annual report notification)	
For further informa	ation concerning this matter,	please call:	
Ebson S	iilva Dias	at ( 239 ) 357-0421	
Name	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check	k for the following amount n	nade payable to the Florida Depar	tment of State:
□\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ac		Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building	
1 allahassee	e, FL 32314	2661 Executive Center Circl	le
		Tallahassee, FL 32301	



May 1, 2012

**EBSON SILVA DIAS** 2814 11TH ST SW LEHIGH ACRES, FL 33976

SUBJECT: MOUNT ZION TRANSPORT, INC.

Ref. Number: P10000070725

We have received your document for MOUNT ZION TRANSPORT, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box referencing the adoption of the amendment.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 312A00013053

www.sunbiz.org

Exvision of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314 Adec: 31 Stor of Cor

EUX NO: :40132SETEB

FROM : MOUNT, Z10N

## Articles of Amendment to Articles of Incorporation of

Mount Zion Transpor	t, Inc	
(Name of Corporation as currently filed with	the Florida Dept. of State)	
P10000070725		
(Document Number of Corporat	ion (if known)	
Pursuant to the provisions of section 607.1006, Florida Status amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Profit Corporatio</i>	n adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>	
		The new
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associations and the contain the word "chartered,"	orp," "Inc," or "Co". A professi	porated" or the onal corporation
B. Enter new principal office address, if applicable:	6119 Metrowest Blvd Unit 114	<b>13</b>
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Orlando Fl 32835	<b>姜</b> 磐
		10 7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		12 MAY 18 PM 3: 47
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		ne of the
Name of New Registered Agent:		
New Registered Office Address: (Flor	ida street address)	
·	, Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	iliar with and accept the obligation  Registered Agent, if changing	s of the position.

## If amending the Officers and/or L. ctors, enter the title and name of each officer being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
VP	DILSON PEREIRA	4172 CASTILLA CIR APT 202	_ 🛚 Add
	• •	FT MYERS FL, 33916	_ ☑ Remove
VP	MELQUIZEDEQUE DIAS	2814 11th ST SW	🔼 Add
		LEHIGH ACRES, FL 33976	_ [] Remove
			_ 🗋 Add
			_
	nding or adding additional Articles, enter cadditional sheets, if necessary). (Be specificational sheets)		
<del></del>			
			·
<del></del> _	diament of the second	1. 1	
F. If an	amendment provides for an exchange, recl sions for implementing the amendment if n	assification, or cancellation of it	ssued shares,
	f not applicable, indicate N/A)		. 115-111
			<del></del>
			-
	<del></del>		<del></del>

The date of each amendme	nt(s) عن بtion:
,	(date of adoption is required)
Effective date <u>if applicable</u>	05/16/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s	(CHECK ONE)
	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	were approved by the shareholders through voting groups. The fallowing statemen ided for each voting group entitled to vote separately on the amendment(s):
"The number of vot	es cast for the amendment(s) was/were sufficient for approval
by	33
•	(voting group) '
The amendment(s) was, action was not required	were adopted by the board of directors without shareholder action and shareholder.
The amendment(s) was, action was not required	were adopted by the incorporators without shareholder action and shareholder.
Dated	05/16/2012
Signatur	
•	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, trustce, or other court
	appointed fiduciary by that fiduciary)
	Ebson Silva Dias
	(Typed or printed name of person signing)
	PRESIDENT
,	(Title of person signing)