Division of Corporations

Page 1 of 1

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000155153 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : THE ELITE CARRIER SERVICES OF MIAMI LLC

Account Number : I20120000040

: (305)405-2600 Phone

: (305)405-2601 Fax Number

\*\*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 O/D RESIGN AB TRANSPORT CORP



0
0
01
\$35.00

JUN 1 1 2012 C. MUSTAIN

Electronic Filing Menu

Corporate Filing Menu

6/11/2012

https://efile.sunbiz.org/scripts/efilcovr.exe

## COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: AE	TRANSPORT	CORP	
	000076390		
The enclosed Articles of Amendmen	and fee are submitted for	filing.	
Please return all correspondence cond			
r toase rotatii ali correspondence con	setting the nation to the to	downig.	
ZOELYN	I IGLESIAS		
		Contact Person	
THE ELI	TE CARRIER S	ERVICES	OF MIAMI LLC
0000		n/ Company	
6802 NV			
S INAAINA	FL 33166	Address	
IVIIAIVII, C		te and Zip Code	
	•	•	
	ELITECSOM.CO		
h-mail ad	dress: (to be used for futur	e annuat report n	councation)
For further information concerning th	is matter, please call:		
ZOELYN IGLESIAS		<sub>at (</sub> 305	405-2600
Name of Contact Pers		Area Cod	e & Daytime Telephone Number
Enclosed is a check for the following	amount made payable to the	ne Florida Depar	tment of State:
	ate of Status Certific	Filing Fee & cd Copy onal copy is cd)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street A	
Amendment Section Division of Corpor			nent Section of Corporations
P.O. Box 6327		Clifton I	Building
Tallahassee, FL 32	314		ecutive Center Circle see, FL 32301

w 1

## Articles of Amendment to Articles of Incorporation of

AB TRANSPORT CORP	
(Name of Corporation as currently filed with the F P1000076390	Cloride Dept. of State)
(Document Number of Corporation (i	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;	-e≈ The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or " word "chartered," "professional association," or the abbreviation "	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address if applicable;	13547 SW 66 ST 差許 旨
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33183
	Ри
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13547 SW 66 ST
	MIAMI, FL 33183
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address Name of New Registered Agent ALEXIS CANTO	
13547 SW 66 S	ST
	reet address)
Now Registered Office Address: MIAMI (City)	, Florida 33183 (Zip Code)
New Registered Agent's Standard, 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.

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 Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	P	ALEXIS CANTO	15547 SW 60 ST MIAMI, FL 33163
2) Change Add Remove	9	ALEJANDRO R GARCIA	3149 W 78 PLACE HIALEAH FL 33018 US
3) Change Add Remove	-		
4) Change Add Remove		<u> </u>	
5) Change Add Remove			
δ) Change Add Remove			

attach additional sheets, if necessary).	(Be specific)
	, <u>, , , , , , , , , , , , , , , , , , </u>
If an amendment provides for an exchi- provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself;

• •

· ·

The date of each amendment(s)	adoption: 06/11/2012	
Effective date if applicable:	6/11/2012	
	(no more than \$	0 days after amendment fils date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were so by the shareholders was/were s		e number of votes cast for the amendment(s)
		ough voting groups. The following statement vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/we	re sufficient for approval
by	(voting group)	**
	(voting group)	
The amendment(s) was/were ad action was not required.	lopted by the board of directors	without shareholder action and shareholder
The amendment(s) was/were ac action was not required.	lopted by the incorporators with	nout shareholder action and shareholder
Dated 06/11	/2012	<del></del>
Signature K	director medicat or other offi.	cer - if directors or officers have not been
select		e hands of a receiver, trustee, or other court
	ALEJANDRO R	GARCIA
	(Typed or printed	name of person signing)
	PRESIDENT	
	(Title of persor	ı signing)