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SECRETARY OF STATE



COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION O	TION:	Swap Taxi, 00/2552	Inc
The enclosed Articles of .	Amendment and fee are cu	bmitted for filing.	
Please return all correspon	ndence concerning this mat	tter to the following:	
	Shone 1	M. Sheffield Name of Contact Person	7
		Name of Contact Person	
	/ ank sa	rep Tox' Tree Firm/Company	-
	4.	Firm/ Company	
	1617 At	lange 15/00	#101
	Taken 11	Address	747
	J coesare vo	, , , , , , , , , , , , , , , , , , ,	207
1617 Aflande Blud #101 Address Jacksandle Fe 32207 City/ State and Zip Code Shane @ fanksanpfaxi . com E-mail address: (to be used for future annual report notification)			
	E-mail address: (to be us	ed for future annual report no	tification)
For further information co	oncerning this matter, pleas	e call:	
Shan M.	SheffaU	at (904	591-5704 & Daytime Telephone Number
Name of C	Contact Person	Area Code	& Daytime Telephone Number
Enclosed is a check for th	ne following amount made p	payable to the Florida Departs	ment 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)
Mailin	g Address	Street Ac	ldress
Amend	ment Section	Amendme	ent Section
Divisio	n of Corporations	Division of	of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Ar	rticles of Incorporation	
TON Sound	Taxi Inc	
(Name of Corporation as currently filed	d with the Florida Dept. of State)	
P1100001		
(Document Number of Co		
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:		owing amendment(s) to
A. If amending name, enter the new name of the corp	oration:	
		The new
"Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the ab B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	breviation "P.A."	nust contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SECRETAL 13 NOV -1
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent		RY OF STATE CARPORATIONS
	(Florida street address)	

New Registered Office Address:

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.

Signature of New Registered Agent, if changing

(City)

, Florida_

If amending the Officer's 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> <u>John I</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike J</u>	Jones	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Todd A. Knowles	204 Devoe Street Judesawill. FC 3220)
Add			Jules awill. FC 3220)
Remove	,	0 / 0	
2) Change Add	V <u>S</u>	Jenni fer Sheffull	1534 Marco Place Jadesmill. Fe 3220
Remove 3) Change	PT	Share M. Sheffell	1534 Marco Place Jacksmill FC 72207
Add Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artic ttach additional sheets, if necessary).	(Be specific)
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij noi appucable, maicale NA)	
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: date this document was signed.	November 1, 2013	, if other than the
Effective date if applicable:	November 1, 2013	
market in applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.	
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the a	amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder	
Dated_ Nova	bu 1, 2013	
Signature	M. Shake I	
selected, by an	president or other officer - if directors or officers have not been incorporator - if in the hands of a receiver, trustee, or other court ciary by that fiduciary)	
	Share M. Sheffield	
	(Typed or printed name of person signing)	
	Via President	
	(Title of person signing)	