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TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Bus Truck Allison Transmission Ports Inc. DOCUMENT NUMBER: P110000 53169
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bus Truck Allison Transmission Parts Firm/ Company
Firm/Company 1670 W 39 PL. #1301 Address
Hialeah / FL - 33012 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Douglas Lobaina at (786) 356-0003 Name of Contact Person Area Code & Daytime Telephone Number
S35 Filing Fee Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Bus Truck Allison Transmissi		- 7VIC.		
(Name of Corporation as currently	filed with the Flo	rida Dept. of State)		
P110000 53169		<u> </u>		
(Document Number of	Corporation (if known	own)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corp	oration adopts the follow	ving amend	lment(s) to
A. If amending name, enter the new name of the corporation:				
Bus Truck Transmi	ssion	Inc.	The n	new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Cword "chartered," "professional association," or the abbreviation "I	," "company," or Co". A profession	"incorporated" or the		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A_			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	(1) (4) (4) (4) (4) (4) (4) (4) (4)	23	- - - <u>-</u>
D. If amending the registered agent and/or registered office address:	ess in Florida, ent	<u>Z'</u>	16 AM 2:	
Name of New Registered Agent			<u>:</u>	
(Florida stree	ct address)	, Florida		····•
, ,	City)	(Zi	ip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi			<i>1</i> .	
Signature of New Re	gistered Agent, if c	hanging		

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		<i>\\</i> /A	
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

	ding or adding ac dditional sheets, i	f necessary).	(Be specific)			
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an am	endment provide	s for an exchai	nge, reclassifica	tion, or cancella	tion of issued sh	ares,
orovisio (if)	ons for implement not applicable, ind	ting the amend licate N/A)	ment it not cor	rained in the am	endment itself:	
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	n(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareho action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10 11 17 **	
Signature	
(By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – it in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	n purt
Douglas Lobaina (Typed or printed name of person signing)	
President (Title of person signing)	
(Title of person signing)	