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| ☐ PICK-UP | ☐ WAIT | MAIL |
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| | Business Entity Name) | |
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| Certified Copies | Certificates of | Status |
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| Special Instructions t | o Filing Officer: | |
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5/25/01

COVER LETTER.

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: MARTHA ANN TI | RUCKING, INC | | | | | |
|--|---|--|--|--|--|--|
| DOCUMENT NUMBER: P11000059682 | | | | | | |
| The enclosed Articles of Amendment and fee are sub | omitted for filing. | | | | | |
| Please return all correspondence concerning this matt | ter to the following: | | | | | |
| | SYLVIA HAMILTON | | | | | |
| | Name of Contact Person | | | | | |
| MAR | MARTHA ANN TRUCKING, INC | | | | | |
| | Firm/ Company | | | | | |
| 429 | 99 CROSSROAD CT | | | | | |
| | Address | | | | | |
| | ORLANDO , FL 32811 | | | | | |
| | City/ State and Zip Code | : | | | | |
| | | | | | | |
| E-mail address: (to be use | ed for future annual report | notification) | | | | |
| | | | | | | |
| For further information concerning this matter, please | e call: | | | | | |
| Sylvia Hamilton | at (407 | 590- 4609 de & Daytime Telephone Number | | | | |
| / Name of Contact Person | Area Co | de & Daytime Telephone Number | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | | | |
| \$35 Filing Fee \$\text{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) | | | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle | | | | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MARTHA ANN TRUCKING INC

| (Name of Corporation as curr | ently filed with the Florida Dept. of State) |
|---|--|
| (Document Numb | per of Corporation (if known) |
| Pursuant to the provisions of section 607.1006. Florida Statutes, test Articles of Incorporation: | this Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corporation | <u>ı:</u> |
| | The new |
| name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviati | ration, "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must confuln the |
| 3. Enter new principal office address, if applicable: | 4366 CROSSROAD CT |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | ORLANDO, FL 32811 |
| | 70 5 |
| | 2 2 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 50 60 |
| (| |
| | |
| | |
| If amending the registered agent and/or registered office and/or the new registered agent and/or the new registered office add | |
| - | . 1. 233. |
| Name of New Registered Agent | |
| (Florid | la street address) |
| New Registered Office Address: | , Florida |
| The regime of Office radions. | (Circ) (Zip Code) |
| | |
| New Registered Agent's Signature, if changing Registered Ag | gent: |
| hereby accept the appointment as registered agent. I am famil | |
| | |
| | |
| Signature of V | ore Registered Agent if changing |

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 Do | <u>e</u> | |
|----------------------------|--------------|--------------|-------------|-------------|
| X Remove | <u>v</u> | Mike Jo | nes | |
| X Add | <u>sv</u> | Sally Sn | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | - | | |
| Add | | | | |
| Remove | | | | · · |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| • Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| ittach <i>ad</i> | ing or adding additional Articles, e Iditional sheets, if necessary). (Be | specific) | | | |
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| rovisio | endment provides for an exchange, ns for implementing the amendmen of applicable, indicate N/A) | reclassification, or it if not contained | cancellation of issu in the amendment in | ed shares, self: | |
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|--|---|--|
| The date of each amendment(s) adoption date this document was signed. | on: | if other than the |
| Effective date if applicable: | 6 · | |
| | (no more than 90 days after amendment file | dote) |
| Note: If the data inserted in this block of document's effective date on the Departm | dose not meat the applicable statutory filing require and of State's records. | ments, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopted to by the shareholders was/were sufficient | by the shareholders. The number of votes cast for the | : amendment(s) |
| The amendment(s) was/were approved must be superately provided for each | by the shareholders through voting groups. The foll voting group entitled to vote suparately on the amen | owing ziałement dment(s): |
| "The number of votes east for the | e amendmera(s) was/wore sufficient for approval | · |
| by | (voting group) | |
| | (voling group) | |
| ☐ The amendment(s) was/were adopted it action was not required. | by the board of directors without shareholder action a | nd shareholder |
| ☐ The amendment(s) was/were adopted it action was not required. | ry the incorporators without shareholder action and s | harsholder |
| Detod | <u> </u> | |
| Signature | hua Humothi | |
| | , president or other officer - if directors or officers h | usve not been |
| | in incorporator - If in the hands of a receiver, trustee | , or other court |
| appointed Ind | uniary by that fiduciary) | · |
| | Juluia Hamilton | |
| | (Typed or printed name of person signing) | |
| | Mylua Standton | L/ |
| | (Title of person signing) | |