## P11000083595

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: BETHEL TRANS	PORT INC		
DOCUMENT NUM	1BER: P11000083595			
	es of Amendment and fee are su	bmitted for filing.		
Please return all cori	respondence concerning this ma	tter to the following:		
	OSWALDO B MARTINEZ			
	Name of Contact Person			
		Firm/ Company		
	1574 OAK LEAF LANE			
	KISSIMMEE FL 34744	Address		
		City/ State and Zip Cod-	e	
	BETHELTRANSPORT78@	HOTMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
OSWALDO B MAF	RTINEZ	at ( <sup>407</sup>	de & Daytime Telephone Number	
Name of Contact Person Area Code & Daytime Telephone		de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ar Di P,0	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

BETHEL TRANSPORT INC

(Name e	of Corporation as current	tly filed with the Florida Dej	pt. of State)	
P11000083595				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation :	adopts the following amendment(s) to	
A. If amending name, enter the new n	ame of the corporation:			
BETHEL ENTERPRISES INC			The new	
name must he distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp, " "Inc, " or "Co".	A professional corporation	" or the abbreviation "Corp.,"	
B. Enter new principal office address,	if annlicable:	1574 OAK LEAF LANE	1574 OAK LEAF LANE	
(Principal office address MUST BE A S		KISSIMMEE FL 34744		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1574 OAK LEAF LANE		
		KISSIMMEE FL 34744		
D. If amending the registered agent ar	nd/or registered office add	lress in Florida, enter the na	T S 20	
new registered agent and/or the new				
Name of New Registered Agent	OSWALDO B MARTIN	EZ	1. 数据学习	
	1574 OAK LEAF LANE			
	tFlorida si	reet address)		
New Registered Office Address:	KISSIMMEE		= 34744** Florida - 60	
	<del>-</del>	(City)	(Zip Code)	
N. B. L. J. W.				
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ns of the position.	
		Registered Agent, if changing	, ,	
L	/ Sfgnature of New I	Registered Agent, if changing		
Check if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VIP	LILIAN E MENA	2715 LUCAS LAKES LN
Add X Remove			KISSIMMEE FL 34744
2) Change	P	OSWALDO B MARTINEZ	2715 LUCAS LAKES LN
Add			KISSIMMEE FL 34744
X Remove Change	<u>P</u>	OSWALDO B MARTINEZ	1574 OAK LEAF LANE
XAdd			KISSIMMEE FL 34744
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach addiri	or adding additional Article onal sheets, if necessary). (	Be specific)	s, acre.		
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an amendi	nent provides for an exchan or implementing the amend	ge, reclassification	on, or cancellatio	on of issued share:	<u>5,</u>
if not a	plicable, indicate N/A)	ment it not conta	med in the amer	idilent itsen:	
(9	princatore, maneure contr				
				<del></del>	

The date of each amendment(s) date this document was signed.	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 document's effective date on the l	block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the ame sufficient for approval.	endment(s)
	pproved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated Of	A. 1	
(By-ar selec	director, president or other officer – if directors or officers have a ted, by an incorporator – if in the hands of a receiver, trustee, or clinted fiduciary by that fiduciary)	not been other court
	OSWALDO B MARTINEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	