## P12 0000 12820

<u>·</u> (Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CURY TRANSPO	RTATION INC	
DOCUMENT NUMI	D10000010000		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	MARIA CURY		
		Name of Contact Persor	1
	CURY TRANSPORTATION INC		
	Firm/ Company		
	1227 LORETTO CIRC		
		Address	1
	ODESSA FL 33556		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	City/ State and Zip Code	<del>-</del>
curvt	ransportation@hotmail.com		
		sed for future annual report	notification)
	(		<b>,</b>
For further informatio	n concerning this matter, pleas	se call:	
MARIA CURY		at ( <sup>813</sup>	792-1349
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
Mailing Address Street Address			
Amendment Section		Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle			
		Tallaha	assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CURY TRANSPORTATION INC	
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
P12000012820	
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
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.," word "chartered," "professional association," or the abbreviation.	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Frincipal office address MOST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	ي بي الم
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add	
	that and the state of the state
Name of New Registered Agent	
<u> </u>	
(Florid	da street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiary	
	7 0 7 1

Signature of New 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	·		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add _			
Remove			

L. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
		<u></u>
	<u> </u>	<del></del>
		T
<del></del>		
. If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
PEDRO E MASEDA DEL VALLE PRES	SIDENT 50% SHARES	
MARIA M CURY MIRANDA TRE	EASURER 50% SHARES	
		<u> </u>
		•

The date of each amendmen		, if other than the
date this document was signed	1. - 08/03/2016	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this of the Department of State's records.	late will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendment vere sufficient for approval.	:(s)
	ere approved by the shareholders through voting groups. The following statem led for each voting group entitled to vote separately on the amendment(s):	nent .
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by PEDRO E MAS	EDA DEL VALLE	
o,	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	der
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
	3/2016	
Dated Signature _	Shilloreney	
	By a director, president or other officer – if directors or officers have not been	<del></del> n
	elected, by the incorporator – if in the hands of a receiver, trustee, or other co	urt
a		
	MARIA M CURY MIRANDA	
	(Typed or printed name of person signing)	
	TREASURER	
	(Title of person signing)	