

Florida Department of State **Division of Corporations Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : A & L CARRIER SERVICES INC

Account Number: I20110000033

: (786)360-2879

Fax Number

: (786) 362-5270

**Enter the email address for this business entity to be used for future nnual report mailings. Enter only one email address please. **

Email Address: OICSINC @ OOI CON

COR AMND/RESTATE/CORRECT OR O/D RESIGN A & L LINES CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

FEB 1 6 2012

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: A & L LINES CORP
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JEAN C. ALVELO
Name of Contact Person
Firm/ Company
7425 W 22 AVE #202 Address
HIALEAH FL 33016
City/ State and Zip Code
ALCSINC@AOL.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
A & L CARRIER SERVICES INC at 786 360.2879
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
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

Feb. 16. 2012 11:04AM

No. 3128 P. 4

FILED

2012 FEB 16 PM 3-18

SECRETARY OF STATE
TALLAHASSEE, FLORID

Articles of Amendment to Articles of Incorporation of

A & L LINES CORP	STATE FLORIDA
(Name of Corporation as currently filed w	ith the Florida Dept. of State)
	2 (6)
(Document Number of Corpo	ration (if known)
Pursuant to the provisions of section 607.1006, Florida Statuts Articles of Incorporation:	rtes, this Florida Profit Corporation adopts the following amendment(s)
4. If amending name, enter the new name of the corpora	<u>ition:</u>
	The new prorution," "company," or "incorporated" or the abbreviation
corp., Inc., or Co., or the designation Corp., Inc., word "chartered," "professional association." or the abbrevia. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS. Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX) Manual office address office address office in the registered agent and/or registered office in the registered agent and/or registered office in the registered agent and/or the new registered office in the registered agent and/or the new registered office in the registered agent and/or the new registered office in the registered office in the registered agent and/or the new registered office in the registered agent and/or the new registered office in the registered office in the registered agent and/or the new registered office in the registered office in the registered office in the registered agent and/or the new registered office in the registered agent and/or regi	ice address in Florida, enter the name of the
	<u> </u>
Name of New Registered Agent	
(Fic	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fai	
Signature of New Regis	stered 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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	۷P	LISANDRA GONZALEZ	7425 W 22 AVE # 202
Add Remove			HIALEAH FL 33016
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove	<u> </u>		
5) Change Add Remove	<u></u>		
6) Change Add Remove			

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The date of each amendment(s)	adoption: FEBRUARY 16 2012
Effective date if applicable:	EBRUARY 16 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	19
	(voting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
_{Dated} FEBF	RUARY 16 2012
Signature	Line Comelf.
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	LISANDRA GONZALEZ
	(Typed or printed name of person signing)
	VP
	(Title of person signing)