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Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: PROMINENT SERVICES INC

Account Number : I20150000063

Phone

: (305)889-2880

Fax Number

: (305)889-2881

R. WHITE

MAY 02 2016

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN **PUCHA TRANSPORT CORP**

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COVER LETTER

TO: Amendment Se Division of Cor			
NAME OF CORPO	PUCHA TRANS	PORT CORP	
DOCUMENT NUM	IBER: P12000032269		
	s of Amendment and fee are s	ubmitted for filing.	
Please return all corr	espondence concorning this ma	atter to the following:	
	JOSE MIGUEL KHAZAM	Kassis	
		Name of Contact Pers	unn
	PUCHA TRANSPORT COI		
	Firm/ Company		
	6104 NW 114TH PL, # 212		
	·	Address	
	DORAL, FL 33178		•
		City/ State and Zip Co	ode
Al@	PUCHATR.COM		
	E-mail address: (to be u	sed for future annual repo	rt notification)
l'or further information	on concerning this matter, pleas	so call:	
JOSE MIGUEL KH	AZAM KASSIS	at (786	350-2324 Code & Daytime Telephone Number
Name	of Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida De	partment of State;
\$35 Piling Fee	□\$43.75 Filing Foc & 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)
	iling Address	Stree	t Address
	endment Section	Amer	dment Section
	Islan of Carporations		ion of Corporations
	. Box 6327 ahasace, FL 32314		n Building Executive Center Circle
1 14/1	minimum 1 D 72714	2001	DAGGREI VG CCHICF CHGIG

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Tallahasson, FL 32301

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FILED

16 APR 29 AH 9: 45

Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE FALLANASSIE FLORIDA

PUCHA TRANSPORT CORP				
(Name	of Corporation as currently f	iled with the Florida D	ept. of State)	<u>-</u> -
P12000032269				
	(Document Number of C	orporation (if known)	,	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Flo	orida Profit Corporatio	adopts the following	amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
			7	The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ration "Corp," "Inc," or "Co	". A professional corp		
B. Enter new principal office address, (Principal office address MUST BE A S				
			·····	
				
C. Enter new mailing address, if appli	icable:			
(Mailing address MAY BE A POST	OFFICE BOX)			 -
				
D. If amending the registered agent an	d/or registered office address	in Morida, enter the	name of the	
new registered agent and/or the ner				
Name of New Registered Agent	JOSE MIGUEL KHAZAM K	ASSIS ———————	<u></u>	
	6104 NW 114TH PL, # 212			
	(Florida street	address)		
New Registered Office Address:	DORAL		, Florida	
	(Ci	0)	(ZIP Co	de)
New Registered Agent's Signature, if c	hanoing Registered Agent:	<i>_</i>		
l hereby accept the appointment as regist		und obsept the obligat	ions of the position.	
				,
	Line	RU		
•	Signature of New Regi	stered Agent, if changing	ur	
		יים עור ט	_	

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Example:

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If amonding 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 afficer/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.

∡ Cmange	<u>F1</u>	nom noe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	<u>Tiuc</u>	Name	Addresa
1) Change	P	ABID IQBAL	6104 NW 114TH PL, # 212
Add			DORAL, FL 33178
X Remove		,	
2) X Change	P	JOSE MIGUEL KHAZAM KASSIS	6104 NW 114TH PL, #212
Add			DORAL, FL 33178
Remove			
3) Change			
Add			
Remove			
·			
4)Change		_	
Add			
Remove			
5) Change			
· — •			
Add			
Remove			
5) Change			
Add			
Remove			
			

Page 2 of 4

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If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provident for implementing the amendment if not contained in the amendment itself. (if not applicable, indicate N/A) A	ī/A	onal sheets, if necessary). (Be specific)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
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A .		plicable, indicate N/A)	
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The date of each amendment(s) adoption:date this document was signed.	if other than the
Effective date if applicable:	
(no m	ore than 90 days after amendment file date)
Note: If the date inserted in this block does not meet document's effective date on the Department of State's	the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK O	NE)
☐ The amendment(s) was/were adopted by the shareho by the shareholders was/were sufficient for approval	
☐ The amendment(s) was/were approved by the sharch must be separately provided for each voting group of	
"The number of votes cast for the amendment(s	s) was/were sufficient for approval
by	
 The amendment(s) was/were adopted by the board of action was not required. The amendment(s) was/were adopted by the incorporaction was not required. 	
Dated 04/28/2016	JAK JO
	other officer — if directors or officers have not been — if in the hands of a receiver, trustee, or other court fiductory)
	Moul Khazam Kussis or printed hame of person signing)
	(Title of person signing)