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| (Re | questor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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C. LEWIS

AUG 8 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOI | RATION: <u>No ble</u> BER: <u>P 1200</u> | Crown Trans | sportation inc | |
|---|---|---|--|--|
| | of Amendment and fee are sul | | | |
| Please return all corre | spondence concerning this mat | ter to the following: | | |
| | Noble Co 3917 K vest Polm. h | SLIMANI Name of Contact Person DWN 1(20,5007) Firm/Company FNAS ST Address Olach FL City/State and Zip Code The Transport of the for future annual report | 33403 Blive. com | |
| For further informatio | n concerning this matter, pleas | e call: | | |
| NABYL Name | Slimani of Contact Person | at (561 Area Co | 201 . 9207 de & Daytime Telephone Number | |
| Enclosed is a check for the following amount made payable to the Florida Department 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) | |
| Am Div | iling Address endment Section ision of Corporations . Box 6327 | Amend Division | Address Iment Section on of Corporations Building | |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation

| of . | SEUR: BART OF STATE DIVISION OF CORPORATIONS | | |
|--|--|--|--|
| Noble Crown transf | | | |
| P 120000 789 | 1)7 | | |
| (Document Number of Corporation (if | f known) | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation; | Florida Profit Corporation adopts the following amendment(s) to | | |
| A. If amending name, enter the new name of the corporation: | | | |
| Palm Beach Ground Trans | sportation Inc The new | | |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "cword "chartered," "professional association," or the abbreviation "corporation". | n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the | | |
| B. Enter new principal office address, if applicable: | | | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 3917 KENAS ST | | |
| | W. P. B FL 33403 | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | |
| (Tuming wastess MATE BLATOUS VITICE BOA) | | | |
| | | | |
| | | | |
| D. <u>If amending the registered agent and/or registered office addresses</u> new registered agent and/or the new registered office address: | | | |
| Name of New Registered Agent NABYL | SLIMANI | | |
| - | | | |
| (Florida stre | | | |
| New Registered Office Address: 341+ KENAS (City) | Stw. l. B., Florida 33403 (Zip Code) | | |
| | • | | |
| New Registered Agent's Signature, if changing Registered Agent: | | | |
| I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. | | | |
| | | | |
| Signature of New Registered | gent of 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>oe</u> | |
|-------------------------------|--------------|----------|---------------|-------------------------------|
| X Remove | <u>v</u> | Mike Jo | ones | |
| X Add | <u>sv</u> | Sally Sr | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) Change | 2 | _ | NABYL Slimani | 3917 KENAS ST |
| _X Add | | | | west lain Beach |
| Remove | | | | FL: 33403 TEL: 561-201-920 |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | W |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | <u> </u> | | | |
| Add | | | | |
| Remove | | | | |

| | dditional Articles, enter change(s) here: if necessary). (Be specific) |
|------------------------|--|
| _ | |
| 111227 | to chance whole come to a spling |
| 1 11 | All |
| TO THE | SLIMANI. to change Noble Crown transportation he NEW NAME M BEACH GROUND TRANSPORTAT |
| | TNC |
| | THANKYOU |
| ANY QUE | chion: |
| | stion: please Goatset me At |
| Loln. | beachtraosportation@ live.com |
| | OR 561 201 9207 |
| | MABYL (DIMM) |
| | 1100/// |
| | |
| • | |
| | |
| | |
| rovisions for implemen | les for an exchange, reclassification, or cancellation of issued shares, nting the amendment if not contained in the amendment itself: |
| (if not applicable, in | |
| | - MA |
| | |
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| | |

| The date of each amendment(s) adoption: | 7-24-2014 | SECSO TARY OF STATE SECSO TARY OF STATE OTHER THAN THE |
|---|---|---|
| date this document was signed. Effective date if applicable: | 7_27_20 Common than 90 days after amen | 14 JUL 28 PM 1:21 |
| | | итен зне ише |
| Adoption of Amendment(s) (CHI | ECK ONE) | |
| The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a | shareholders. The number of votes pproval. | cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the must be separately provided for each voting | shareholders through voting group group entitled to vote separately or | s. The following statement n the amendment(s): |
| "The number of votes cast for the amen | dment(s) was/were sufficient for ap | pproval |
| by | ing group) | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| (voti | ing group) | |
| ☐ The amendment(s) was/were adopted by the baction was not required. | board of directors without sharehold | der action and shareholder |
| ☐ The amendment(s) was/were adopted by the i action was not required. | incorporators without shareholder a | ction and shareholder |
| Dated $7 - 24 - 7$ Signature 1 | 2014 | |
| Signature | dent or other officer - if directors of | or officers have not been |
| | rporator – if in the hands of a recei | |
| / | NABYL Slimo | o i |
| | (Typed or printed name of po | erson signing) |
| | President / Owner | ^ |

(Title of person signing)