12000078917

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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: palm beach ground	d transportation in a			
DOCUMENT NUMBI	12000078017				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
1	NABYL SLIMANI				
_		Name of Contact Person	1		
I	PALM BEACH GROUND TRANSPORTATION				
_		Firm/ Company			
3	3917 KENAS ST				
-	Address				
•	WEST PALM BEACH FL 33413				
		City/ State and Zip Cod	e		
PALM	BEACHTRANSPORTATIO	DN@LIVE.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
NABYL SLIMANI		at (2019207		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment 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 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			

Articles of Amendment to Articles of Incorporation of

PALM BEACH GROUND TRANSPORTATION inc

(<u>Name o</u>	of Corporation as currently	filed with the Florida I	Pept. of State)
12000078917			
<u> </u>	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporatio	n adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
PALM BEACH SIGNATURE LIMO	16		The F-new 😂
name must be distinguishable and continguishable and continue and c	ation "Corp," "Inc," or "C tion," or the abbreviation "P if applicable: TREET ADDRESS) cable:	3939 NE 5TH AVE B 3939 NE 5TH AVE B	105 BOCA RATON FL 33431
D. If amending the registered agent an new registered agent and/or the new	<u>v registered office address:</u>	ss in Fiorida, enter the	name of the
Name of New Registered Agent			
	NABYL SLIMANI		
	(Florida stree	et address)	· <u></u>
New Registered Office Address:	3939 NE 5TH AVE B105 BOCA RATON		33431
	(City)		(Zip Code)
New Registered Agent's Signature, if clip I hereby accept the appointment as regist	ered agent. I am familiar wi		
	Signature of New Re	gistered Agent, if changi	ng

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 <math>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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<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			

ttach <i>additional she</i>	ets, if necessary). (Be specific)			
		•			
					
		-			

an amendment pro	ovides for an exchan	ıge, reclassificatio	n. or cancellation	of issued shares.	
provisions for imple	ementing the amend				
(if not applicabl	le, indicate N/A)				
				مون	

•	MONDAY OCTOBER 31ST	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:	ONDAY OCTOBER 31ST	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
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.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	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	
MONDA Dated	Y OCTOBER 31ST	
	auv ///	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted aductary by that fiduciary)	
	NABYL SLIMANI	
	(Typed or printed name of person signing)	
	OWNER	
	(Title of person signing)	