P130000080884

(Re	questor's Name	e)
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PICK-UP	MAIT WAIT	MAIL
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Certified Copies	_ Ceninca	tes or Status
Special Instructions to	Filing Officer:	
		J. HORNE
		FEB 1 4 2023

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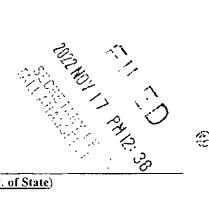
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: KC TRANSPORT	ATION MANAGEMENT,	INC.	
DOCUMENT NUMI	D12000000004			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	VERONICA ANDERSON			
		Name of Contact Person		
	ANDERSON AND ASSOCIATES, P.A.			
		Firm/ Company		
	225 N. FRENCH AVENUE S	SUITE B		
		Address		
	SANFORD/ FLORIDA 3277	1		
		City/ State and Zip Code		
	Veronica@ConsultLawOffice	e Com		
	•	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas		\$43-9901	
Name of Contact Person		Area Coo	843-9901 de & Daytime Telephone Number	
Enclosed is a check fe	r the following amount made	payable to the Florida Depa	artment of State:	
s35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The C	Address Innent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



KC TRANSPORTATION MANAGEMENT, INC.

(Name of Corporation as current	tly filed with the Florida Dept. of State)
P12000080884	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
KC CONSULTANTS, INC.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office add	trace in Florida, anter the name of the
new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida si	reet address)
New Registered Office Address:	, Florida
wew negistered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of Many	Registered Agent, if changing
Signature of New 1	negistered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 ore 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.

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	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) N/A Change		_		
Add				
Remove				
2) N/A Change				
Add				
Remove 3) <u>N/A</u> Change		_		
Add				
Remove				
4) N/A Change		_		
Add				
Remove				
5) N/A Change		_		
Add				
Remove				
6) N/A Change		_		
Add				
Remove				

	or adding additional Ar mal sheets, if necessary)	. (Be specific)		
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If an amendm	ient provides for an ex	change, reclassificatio	n, or cancellation of issu	ied shares.
ficent ar	or implementing the an oplicable, indicat NA)	nendment it not contai	ned in the amendment i	itseit:
	pucubie, mateur 1v A)			
			· · ·	
/A				

The data of each percentage at a	JUNE 17, 2022	if ather than the
The date of each amendment(s) adop date this document was signed.	uon:	, if other than the
N/A		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depar	c does not meet the applicable statutory filing requirements, this comment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was were adopted by the shareholders was/were suffice	d by the sharehol ers. The number of votes east for the amendmentient for approval.	nt(s)
must be separately provided for eac	ed by the shareholders through voting groups. The following states h voting group entitled to vote separately on the amendment(s):	ment
	the amendment(s) was/were sufficient for approval	
by N/A	п	
	(voting group)	
	auri malian	
	tor, president or other officer - if directors or officers have not been	
	y an incorporator – if in the hands of a receiver, trustee, or other co fiduciary by that fiduciary)	urt
VE	RONICA ANDERSON	
	(Typed or printed name of person signing)	
VI	CE PRESIDENT	
_	(Title of erson signing)	

and the second