P12000084930

| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ry/State/Zip/Phone | . #) |
| (Cil | .y/State/Zip/Phone | ; #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECRETARY OF STATE

S SERVICE SEP 1 6 2013

COVER LETTER

| TO: | Amendment Section |
|-----|--------------------------|
| | Division of Corporations |

| NAME OF CORPO | RATION: EXCLUSIVE BER: P1200008493 | | ANSPORT CORP | | |
|-------------------------|---|--|--|--|--|
| The enclosed Articles | of Amendment and fee are sul | omitted for filing. | | | |
| Please return all corre | spondence concerning this mat | ter to the following: | | | |
| | RAFAEL FERRE | R | | | |
| | | Name of Contact Person | l | | |
| | F&S PROJECTS | CORP | | | |
| | | Firm/ Company | | | |
| | 1920 N COMMER | | , STE. 1920-3 | | |
| | | Address | | | |
| | WESTON, FL. 33 | 326 | | | |
| | - | City/ State and Zip Code | | | |
| CC | NTACT@FANDS | PROJECTS.CO | M | | |
| | | ed for future annual report | | | |
| For further information | on concerning this matter, pleas | se call: | | | |
| RAFAEL FE | RRER | at (954 | 482.9681 | | |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number | | |
| Enclosed is a check for | or the following amount made | payable to the Florida Depa | artment 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) | | |
| Ma | illing Address | Street | Address | | |
| An | endment Section | Amendment Section | | | |
| | vision of Corporations | | on of Corporations | | |
| | P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle | | | | |
| Tallahassee, FL 32301 | | | | | |

Articles of Amendment to Articles of Incorporation of

| $\nabla C \cap C \cap V$ | | T TRANSPO | |
|--------------------------|-----------|-----------|-------|
| XI.I II.NIV | E 1154 AH | LIKANSPU | אטואי |

| EXCLUSIVE USA AUT 1 | FRANSPORT CC |)RP | | _ | | |
|---|--|---------------------------------|-------------------------------------|--------------------------------|------------|------|
| (Name of Corporation as | currently filed with the Fl | orida Dept. of State) | | _ | | |
| P12000084930 | | | | _ | | |
| (Documen | t Number of Corporation (if | `known) | | | | |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this I | Florida Profit Corporation ad | lopts the followin | ig amend | ment(s |) to |
| A. If amending name, enter the new na | ime of the corporation: | | | | | |
| | | | | _The n | | |
| name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | ation "Corp," "Inc," or "(| Co". A professional corpora | orated" or the a ution name must | bbreviat contain | ion the | |
| B. Enter new principal office address, | if applicable: | 12505 ORANGE | E DR. | _= | | |
| (Principal office address <u>MUST BE A S</u> | | SUITE 902 | | SEC | ដ | |
| | | DAVIE, FL. 333 | 30 | ARCI. | SEP | |
| | | <i>D.</i> (1), 1, 1, 1, 0, 0, 0 | | - SSE | 9- | F |
| C. Enter new mailing address, if appli (Mailing address MAY BE A POST) | | 12505 ORANGE DR. | | E C | PH | ED. |
| (| <u> </u> | SUITE 902 | | ARY OF STATE VSSEE, FLORIDA | PH 4: 14 | O |
| | | DAVIE, FL. 333 | 30 | | £ | |
| D. If amending the registered agent an new registered agent and/or the new | | | ne of the | | | |
| Name of New Registered Agent | F&S PROJECTS | _ | | | | |
| Nume of New Registered Agent | 1920 N COMERCE P | ARKWAY, STE. 1920-3 | • | | | |
| | (Florida str | | - | | | |
| New Registered Office Address: | WESTON | Florida | 33326 | | | |
| non negistered office ridaress. | (City) | , 1 lorida | (Zip Code) | _ | | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist | hanging Registered Agent: tered agent. I am familiar v gnature of New Registered / | yith and accept the obligation | s of the position. - | | | |
| | ~ =b | U 10 0 0 | | | | |

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 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 | Р | JESUS AGUILERA | 2410 CORDOBA BEND |
| Add | | | WESTON, FL. 33327 |
| X Remove | | | |
| 2) Change | VP | LUDWIG KLEIN | 301 LAKEVIEW DR. APT # 202 |
| Add | | | WESTON, FL.33326 |
| X Remove | | | |
| 3) Change | P | RICARDO CORRENTE | 3272 MUIRFIELD |
| X Add | | | WESTON, FL. 33332 |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | · |
| Remove | | | |
| 6) Change | <u></u> | | |
| Add | | | |
| Damaua | | | |

| amending or adding additional Art. ttach additional sheets, if necessary). | (Be specific) | | | |
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| an amendment provides for an exc | hange, reclassifica | <u>ition, or cancellation</u> | on of issued shares. | |
| provisions for implementing the am (if not applicable, indicate N/A) | enament it not cor | <u>itained in the amei</u> | iament itself: | |
| (ij not applicable, maleule (1771) | | | | |
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| The date of each amendment(s) adoption: 08/28/2013 | | |
|--|--|---------------|
| date this document was signed. | | - |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were adopt by the shareholders was/were suffi | ted by the shareholders. The number of votes cast for the amendment(s) icient for approval. | |
| | oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast fo | or the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/were adopt action was not required. | ted by the board of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were adopt action was not required. | ted by the incorporators without shareholder action and shareholder | |
| Dated 08/28/ | /2013/ | |
| Signature | Sud guller. | |
| selected. | ector president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary) | |
| | JESUS AGUILERA | |
| _ | (Typed or printed name of person signing) | |
| F | PRESIDENT | |

the

(Title of person signing)