## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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Division of Corporations

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From:

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Account Number: I20140000047

Phone : (813)774-4726

Fax Number

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN YVS TRANSPORT INC

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**C LEWIS** 

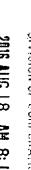
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08/18/16



## COVER LETTER

Division of Corpo			
NAME OF CORPOR	ATION: YVS TRANSPOR	TINC	
DOCUMENT NUMB	P12000089500		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	VALDES, YOSBANY		
•	<del></del>	Name of Contact Person	)
	YVS TRANSPORT INC		
-		Firm/ Company	
	2731 BELL AIRE CIRCLE	·	
•		Address	
	TAMPA, FL 33614		
•	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	3
			·
	E-mail address: (to be us	sed for future annual report	notification)
	•	•	•
For further information	concerning this matter, pleas	se call:	
MARCO ARROYO			7703016
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)
Amer Divis P.O.	ing Address adment Section ation of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building secutive Center Circle sece, FL 32301

SECRETARY OF STATE DIVISION OF CORPORATION

2016 AUG 18 AM 8: 46

## Articles of Amendment to Articles of Incorporation of

YVS TRANSPORT INC	
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P12000089500	
(Досин	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	s Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The *new
name must be distinguishable and contain the wor. "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the	d "corporation," "campany," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADL	
C. Enter new malling address, if auplicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street acktress)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	gistered Agent:
I hereby accept the appointment as registered agent.	I om familiar with and accept the obligations of the position.
Ciae	vature of New Papietared Agent if 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)

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 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 Due is listed as the PST and Mike Jones is listed us 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 Doc. PT as a Change, Mike Jones, V us Remove, and Sally Smith, SV as an Add.

X Change	PT	John Doe		
X Remove	Y	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Addres s	
1) Change	VP	MEDERO, OLGA	2704 WEST KENMORE AVE	
X Add			TAMPA, FL 33614	
Remove				
2)Change				
Add				
Remove				
3)Change				
Add				
Remove				
4)Change				
Add				
Remove				
5) Change				
Add				
Remove		•		
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if neversary). (Be specific)		
M		
·		
	<u>,</u>	
	-	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	<b>3.</b>	

FILED SECRETARY OF STATE DIVISION OF CORPORATION

The date of each amendment(s	adoption:	2016 AUG 18 AM 8: 46 , if other than the
date this document was signed.		•
Effective date if applicable: _	8-18 2016	n 90 days after amendment file date)
<del></del>	(no more the	on 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the ap Department of State's record	pplicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders for each voting group entitled	through voting groups. The following statement it to vote separately on the amendment(s):
•	ast for the amendment(s) was/	were sufficient for approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of direct	tors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators	without shareholder action and shareholder
Dated 8	18-2016 Day	
se)e	a director, president or other cotted, by an incorporator — if it officed fiduciary by that fiduciary	officer — if directors or officers have not been the hands of a receiver, trustee, or other court ary)
	VALDES, YOSBANY	
	(Typed or print	ted name of person signing)
	PRESIDENT	
	(Ti	tle of person signing)