Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : I20140000047 : (813)774-4726 Fax Number : (813)877-2186

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

| Email | Address: |  |
|-------|----------|--|
|       |          |  |

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

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Tallahassee, FL 32303

## From: Trucking Permits And More LLC

## **COVER LETTER**

| TO: Amendment Ser<br>Division of Cor |   |  |   |  |
|--------------------------------------|---|--|---|--|
| NAME OF CORPO                        | RATION: YVS TRANSPOR                      | T INC  |   |  |
|                                      | BER: P12000089500                         |  |   |  |
| The enclosed Article                 | s of Amendment and fee are su             | ibmitted for filing.   |   |  |
| Please return all corr               | espondence concerning this ma             | atter to the following:  |   |  |
|                                      | CASTRO MENES, DIOBEL                      |  |   |  |
|                                      |   | Name of Contact Person   | 1   |  |
|                                      | YVS TRANSPORT INC                         |  |   |  |
|                                      |   | Firm/ Company  |   |  |
|                                      | 5401 25TH AVE SWAPT A                     |  |   |  |
|                                      | <del></del>                               | Address  | <del></del>   |  |
|                                      | NAPLES, FL 34116                          |  |   |  |
|                                      |   | City/ State and Zip Cod  | e   |  |
|                                      | dccargollc0503@gmail.com                  |  |   |  |
|                                      | E-mail address: (to be us                 | sed for future annual report   | notification)   |  |
| For further informati                | on concerning this matter, plea           | se call:   |   |  |
| CASTRO MENES, I                      | DIOBEL                                    | at (   | _) 2199971  |  |
| Name                                 | of Contact Person                         | Area Co  | de & Daytime Telephone Number   |  |
| Enclosed is a check f                | or the following amount made              | payable to the Florida Depa  | artment of State:   |  |
| ■ \$35 Filing Fee                    | S43.75 Filing Fee & Certificate of Status | ☐S43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | Ossiling Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |
| _                                    | illing Address                            |  | Address   |  |
|                                      | ision of Corporations                     |  | n of Corporations   |  |
|                                      | ). Box 6327                               |  | entre of Tallahassee  |  |
| Tal                                  | lahassee, FL 32314                        | 2415 N. Monroe Street, Suite 810   |   |  |

18132001059

From: Trucking Permits And More LLC

## Articles of Amendment to Articles of Incorporation of

| NE TRANSPORTANCE   | of   |                                       |                |
|--|--|---------------------------------------|----------------|
| VS TRANSPORT INC   |  | · · · · · · · · · · · · · · · · · · · |                |
| ( <u>Name of Corporat</u><br>2000089500  | tion as currently filed with the Fl                | lorida Dept. of State)                |                |
| ···  |  |                                       |                |
| (Docum   | ment Number of Corporation (if k                   | nown)                                 |                |
| rsuant to the provisions of section 607.1006, Florid Articles of Incorporation:  | la Statutes, this <i>Florid<b>a</b> Profit Cor</i> | rporation adopts the following amer   | ndment(        |
| •  |  |                                       |                |
| If amending name, enter the new name of the c  | <u> xorporațion:</u>                               |                                       |                |
| me must be distinguishable and contain the word "c   | Cartheration " "Composition " see "inc.            | The                                   |                |
| nc.," or Co.," or the designation "Corp," "Inc,<br>hartered," "professional association," or the abbr  | ," or "Co". A professional cor                     | poration name must contain the v      | rp.,<br>word   |
| Enter new principal office address, if applicable  |  | 2                                     |                |
| rincipal office address <u>MUSTBEA STREETADI</u>   | DRESS)   | FO:                                   |                |
|  |  |                                       | <del>-</del> . |
|  |  | :-                                    |                |
| Enter new mailing address, if applicable;  |  |                                       | <u>. n</u>     |
| (Mailing address MAYBEA POST OFFICE BO   | <u></u>  |                                       | _(_)           |
|  |  |                                       |                |
|  |  | Ö                                     |                |
| H. manding the majes and make a discount   |  |                                       |                |
| If amending the registered agent and/or registered new registered agent and/or the new registered  | office address:                                    | iter the name of the                  |                |
| Name of New Registered Agent   |  |                                       |                |
| - The state of the |  |                                       |                |
| <del></del>  | (Florida street address)                           |                                       |                |
| New Registered Office Address:   |  | Florida                               |                |
|  | (City)   | (Zip Code)                            |                |

Signature of New Registered Agent, if changing

To:

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)

Remove

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; CE(C) = 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, Vas Remove, and Sally Smith, SV as an Add.

| E <b>xample:</b><br><u>X</u> Change | <u> </u>    | John Doe             |                            |
|-------------------------------------|-------------|----------------------|----------------------------|
| X Remove                            | ¥           | Mike Jones           |                            |
| X Add                               | <u>sv</u>   | Sally Smith          |                            |
| Type of Action<br>(Check One)       | Title       | Name                 | <u>Addres</u> s            |
| I) X Change                         | þ           | CASTRO MENES, DIOBEL | 1320 E. MORRIS ST, APT 102 |
| Add                                 |             |                      | DALTON , GA 30721          |
| Remove                              |             |                      |                            |
| 2) Change                           |             |                      |                            |
| Add                                 |             |                      |                            |
| Remove Change                       |             |                      |                            |
| Add                                 |             |                      |                            |
| Remove                              |             |                      | - <del></del>              |
| 4) Change                           | <del></del> |                      |                            |
| Add                                 |             |                      |                            |
| Remove                              |             |                      |                            |
| 5) Change                           | <del></del> |                      |                            |
| Add                                 |             |                      |                            |
| Remove                              |             | -                    |                            |
| 6) Change                           |             | <del></del>          |                            |
| Add                                 |             |                      | <del></del>                |
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| 7 | ^ |  |  |
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From: Trucking Permits And More LLC

| macii <i>udamonai sh</i> e                                 | iets, if necessary). (E  | ъе хресідіс)                                |  |                                       |             |
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| an amendment proprovisions for imple<br>(if not applicable | ovides for an exchang<br>ementing the amendm<br>e. indicate N/A) | e, reclassification,<br>lent if not contain | or Cancellation of<br>ed in the amendm | issued shares,<br>ent itself:         |             |
|  |  | <del></del>                                 |  | <u></u>                               |             |
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|  |  |   |  |                                       |             |
|  |  |   |  |                                       |             |

| The date of each amendment(s) adoption:, if other than the date this document was signed.  |
|--|
| Effective date if applicable:  |
| (no more than 90 days ofter amendment file date)   |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.         |
| Adoption of Amendment(s) (CHECK ONE)   |
| ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.  |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.   |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):       |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  |
| by   |
| (voting group)   |
| Dated_06/03/2024   |
| Signature_Diobel Castro Menes  |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| DIOBEL CASTRO MENES  |
| (Typed or printed name of person signing)  |
| PRESIDENT  |
| (Title of person signing)  |