(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
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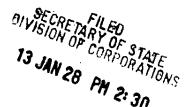
T. BROWN

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: CONSOLIDO DOCUMENT NUMBER: P120000	, · · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Consolidal 1250 E-Hallar Halland	Name of Contact Person Hed Auto Transport Firm/ Company Hed Boh Blvd #602 Address Ale, F. 33009 City/ State and Zip Code Gamail. Con sed for future annual report notification)
For further information concerning this matter, please	se call:
Lardes Hederos Name of Contact Person	at (954) 456-1233 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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



Consolidated Auto Transp	nt. Inc.
(Name of Corporation as currently filed with the	<u> </u>
P12000091455	
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1250 E. Hallandale Bch Blvd
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	#609
	Hallandale, Fr 33009
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1250 E. Hallandale Beh Blvd
	#602
•	
and the second s	Hallandale, FL 33009
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent Ryan We	bman
	ndale BCh Blvd #602
New Registered Office Address: Hall and al	
New Registerea Office Address: New Color	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New Registered	Agent, if changing

3. * \frac{1}{2}.

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:	ove, una sa	any smun, sv as an Aaa.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change	D	Larry Webman	1250 E Hallandale Boh Blva #602
Add Remove			Hallandal Fi 33009
2) Change			
Add			
Remove			
3) Change			<u> </u>
Add			
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4) Change			
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provisi	nendment prov ons for implen not applicable,	nenting the a	mendment if	lassification, not contains	or cancellati ed in the ame	on <u>of issued s</u> ndment itself	shares, <u>:</u>	
								
			· · · · · · · · · · · · · · · · · · ·					
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The date of each amendment(s) a	idoption: 01/23/2013
Effective date if applicable:	01/23/2013
	(no more than 90 days after amendment file date)
	·
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated Ol	24/2013
Signature	// h //
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court
appoir	nted fiduciary by that fiduciary)
**	Ryan Webman
*	(Typed or printed name of person signing)
	President
	(Title of person signing)

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