P12000097368

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8/15/13

COVER LETTER

: :

Division of Corporations					
NAME OF CORPORATION: DELIVERY ROAD INC DOCUMENT NUMBER: P12000097368					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Please return all correspondence concerning this matter to the following: HAYDEE VALDERRAMA Name of Contact Person QUALITY BUSINESS SOLUTIONS (LCC Firm/ Company 1229 PROVIDENCE BAND Sutte G Address DECTONA FL 32725 City/ State and Zip Code VACDERRAMA BUSINESS QUANDO. COM E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
HAUDEE VALDERAMA at 386 359-4971 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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	Articles of Ame	endment	FILED	
	to	45	FILLE	
	Articles of Incor	роганоп	12 PM	3: 39
\ \			2813 AUG 12 PM	70 5
DELIVERY KO		<u> </u>	OF 3	ORIDA
(Name of Corporation as currently	filed with the Flor	rida Dept. of State	TALLAHASSEE, FI	_0,
P1200009731	6 X		(ALLEN	
(Document Number o		nown)	10	-
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	•	•	ation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the o	corporation:			
				The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Cor, word "chartered," "professional association," or the	p," "Inc," or "Co	". A professional	incorporated" or the a corporation name must	bbreviation
D. Enders and a first of the state of the st	P	730 01	JAHALA CRI	FEK RD
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD				
(1 incipal office address incor BLA STILLET AD	<u>D1000</u>)	BRYSON	City, NC	_ 28713
				-
O Potential and the Advantage of the Complete Co			_	. ~ .
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	OX)	730 UN	JAHALA CR	EEK KD
(Making acaress MAT DE A 1 001 011 1CE D	<u>971</u> /			
		JRY SON	· City, NC	: 28713
				-
D. If amending the registered agent and/or registered agent and/or the new registered		s in Florida, enter	the name of the	
	NII			
Name of New Registered Agent				
	1			
	(Florida street	address)		
	,	•		
New Registered Office Address:			Florida	_
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Re	egistered Agent:			•
I hereby accept the appointment as registered agent.	I am familiar wit	h and accept the ob	ligations of the position.	
Signature of i	New Registered Age	ent if changing		
Signature of 1	require en ng	,		

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.

X Change	<u>PT</u>	John Doe					
X Remove	<u>v</u>	Mike Jone	<u>s</u>				
X Add	<u>şv</u>	Sally Smit	<u>h</u>				
Type of Action (Check One)	Title	<u>N</u>	lame			Address	
1)Change		<u> </u>		NA			
Add				1		·	_
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 necessary). (Be specific)
PLEASE CHANGE THE PRINCIPAL AND MAILING Adress to:
730 UNAHALA CREEK, RD BRYSON CHY, NC 28713
- BRYSON CITY NC 28713
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
(y not applicable, malcule 14/1/)

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The date of each amendment(s) at date this document was signed.	option:	, ii ouner than th
Effective date if applicable:		
Enterine date in apparatuse.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	8/7/13 MCarro.	
(By a d	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	MARIA E. CASTRO	_
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	