P13000016920

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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03/04/13--01035--019 **35.00



Charles May

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: #B Trans port Corp. DOCUMENT NUMBER: P1300001420				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
ROSALINA CAN DIA Name of Contact Person HB Trom Mart Corp. Firm/ Company Sax 77 ST YPT HI Address Wiani Brach Fl 3314/ City/ State and Zip Code TOSALINA CAN DIA & YOCKET HAIL COM E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at (717) 228-9102 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 Status				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, Fl. 32301				

Articles of Amendment to

Articles of Inco	rporation
HB Transport	Corp.
(Name of Corporation as currently filed with the Flo	rida Dept. of State)
713000016920	
(Document Number of Corporation (if I	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Kasaliwa Cawdig 525 77 ST APHAI Miny: Beach El 33141
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13 MAD
D. If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address: Name of New Registered Agent Solution Solution	andra Apt 11
New Registered Office Address: MiQM; B-eo(City)	of address)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am fanthar wi Signature of New Registered Agent.	and Ne

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 D	<u>oe</u>		
X Remove	<u>y</u>	Mike J	ones		
X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	^	Address
1) X Change	Pro	dent	Rosakua	Candia	Mani Beah Fl 3314
Add					Miani Beah Fl 3314
Remove					717-228-9102
2) Change					
Add					
Remove					
3) Change		_		, 	
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_ _			
Add					
Remove					
6) Change		_		 	
Add					
Remove					

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
		
		,
		
If an amendment provides for an exch	ange, reclassification, or cancellation of issued	shares,
(if not applicable, indicate N/A)	<u>ndment if not contained in the amendment itsel</u>	<u>f:</u>
(tj not applicable, thatcale WA)		
		
		

The date of each amendment(s) adoption: 2213
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated
Signature Signature
(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)
Rosalina Candia
(Typed or printed name of person signing)
(P) Roseline andra
(Title of person signing)