To: 18506176380 Page: 2 of 7 2027:85-19 16:19:09 GUT 13054829854 From: Erit Conzolez https://etije.sunbuz.org/scripts/crimovites/c
Dirdsfon oh Corporations Flourida Departument of State
Division of Corporations Electronic Filing Cover Sheet
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(((H21000162186 3)))
H210001621863ABC.
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To: Division of Corporations Fax Number : (350) 617-6380 C From: Account Name : TRAMILEX LLC Account Number : 120150000086 Phone : (786) 469-9163 Fax Number : (305) 948-3716
COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUE TRANSPORT SERVICES INC Certificate of Status 0 Certified Copy 0 Page Count 01 Estimated Charge \$35.00 MAY 20 2021 ALBRITTON
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o: 18506176380	Page: 3 of 7	2021-05-19 16:19:08 GMT HZ1000162186 3	13054022854	From: Erik Gonzatez
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, <u>, ,</u>	• • •		·	
· .		COVER LETTER	· · ·	
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TO: Amendment Division of C	Section			· ·
Division of c			· · ·	· ·
	BLUE TRAN	SPORT SERVICES INC	·	
NAME OF COR			· · · · · · · · · · · · · · · · · · ·	
DOCUMENT N	UMBER:	· · · · · · · · · · · · · · · · · · ·		•
an iteration	icles of Amendment and fee a	re submitted for filing.		
•		•		
Please return all c	orrespondence concerning thi	s matter to the following:		۰ ۲
	Guillermo A Flores		· · · · · · · · · · · · · · · · · · ·	· · · ·
		Name of Contact Person		
	BLUE TRANSPORT S	ERVICES INC		· · · · ·
	<u> </u>	Firm/ Company	. ·	· .
	17620 NW 47th Ave		· · ·	
	•	Address	· · ·	· · ·
•	Miami Gardens, FL 330			· .
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code		· · · ·
	• •			•
				•
	E-mail address: (to	be used for future annual report notifi	cation)	
		· · · ·	•	• • •
· For further infor	mation concerning this matter	, please call:		• •
	· .	,305 . 6	49-1013	• .
Guillermo A Fb	· · · · · · · · · · · · · · · · · · ·	at (Daytime Telephone Number	
••	vame of Contact Person		· .	•
Enclosed is a ch	eck for the following amount	made payable to the Florida Departme	nt of State:	
	· .	_ ```	•	· · · ·
🔳 \$35 Filing	Fee S43.75 Filing F		\$52.50 Filing Fee	·
	Certificate of St	(Additional copy is	Certified Copy	•••
	*.	enclosed) (Additional Copy	
•			is enclosed)	
·	Mailing Address	Street Add	r <u>css</u>	
• •	Amendment Section	Amendmen	Section -	. ,
•	Division of Corporations	Division of The Centre	Corporations of Tallahassee	· · · ·
· <u>·</u>	⁻ P.O. Box 6327	2415 N. M	onroe Street, Suite 810	• •
	Tallahassee, FL 32314	Tallahassee	, FL 32303	•
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To: 18506176380	Page: 4 of 7	2021-05-19 15:19:0	а GMT 1016С186 [13054022854	From: Erik Gonzal
•	• • •	HUN			
	. •	· · ·			
	•	Articles of Am	endment	•	· · ·
		to Articles of Incor	noration		· ·
	• •	of	• • • • •		
BILUE TI	RANSPORT SERVICES INC				
	. (Name of	Corporation as currently	filed with the Flo	rida Dept. of State)	
P130000	39450	· .		• .	· · · · · · · · · · · · · · · · · · ·
• <u> </u>		(Document Number of C	Corporation (if kno	wn)	•
	to the provisions of section 607.1 is of Incorporation:	006, Florida Statutes, this Fl	orida Profit Corp.	oration adopts the follo	wing amendment(s) to
A. If am	ending name, enter the new na	me of the corporation:		, -	
N/A		•		• •	The new
name mu	st be distinguishable and contain	the word "corporation," "co	mpany," or "incoi	porated" or the abbrev	iation Corp.
"Inc " c	st be distinguishable and comuni- w Co.," or the designation "C ed," "professional association,"	orp." "Inc," or "Co". A	professional corp	oration name must co.	niain the word
	•		N/A		
B. <u>Enter</u>	r new principal office address, i al office address <u>MUST BE A Si</u>	if applicable:			<u> </u>
. (Principe	n office and ess <u>most men of</u>		·····		
		· ·		·. ·	
		· .	•	•	0
C. Ente	er new mailing address, if appli ling address <u>MAY BE A POST</u> (cable: OFFICE BOX)	• N/A •		5-2
(Mat	ing address <u>street worth ones</u>	· · · · · · · · · · · · · · · · · · ·			Sic I O
					<u><u> </u></u>
	•	•		<u> </u>	
D. If an	nending the registered agent an	d/or registered office addre	ess in Florida, ent	er the name of the	
new	registered agent and/or the new	w registered office address:	•		
••	Name of New Registered Agent	Guillermo A Flores	•.	·	
	<u></u>	17620 NW 47 Ave	· •	• ,	
	• • •	(Florida stre	et address)		· · ·
• .	A D A D A D A D A D A D A D A D A D A D	Miami Gardens	•	330 Florida	55
• • •	New Registered Office Address:	/	City)	·····	(Zip Code)
••	•			• •	
		· · ·			
<u>New Re</u>	gistered Agent's Signature, if c	hanging Registered Agent:	ith and accept the	obligations of the posit	ion.
l hereby	accept the appointment as regis	ierea agern. Tantjannin		15	·
	· ·			`	
	•				· · · ·
	·	Signature of New Re	gistered Agent. If	changing	· · · ·
Check i	f applicable	•	· • •	• • •.	· · ·
🗇 The :	amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (e), F.S.	• •	
	· ·				
	•	• _ •	•	•	•
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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 = ChiefExecutive 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 Y 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: PΤ John Doe . X Change <u>V</u> Mike Jones X Remove Sally Smith <u>SV</u> X Add Address Type of Action <u>Name</u> Title (Check One) 18202 SW 109 PL Jesus F Suarez Lopez 1) ____ Change MIAMI, FL 33157 Add Х Remove 17620 NW 47 Ave Guillermo A Flores х Change 21 Miami Gardens, FL 33055 Add Remove 3). Change Add Remove Change Add Remove Change 5) Add Remove ெ Change Add Remove

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1° Manuardina -	or adding additional Articles.	, enter change(s) here:	·.	••		•
Attach additio	or adding additional Articles, onal sheets, if necessary), (Bu	e specific)		• •		
N/A	·			- 		
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E If an ament	dment provides for an exchan	ige, reclassification, or ca	ncellation of iss	ued shares,		·.
provisions	dment provides for an exchan s for implementing the amend applicable, indicate N/A)	ment if not contained in t	the amendment	<u>itsell:</u>		
N/A						
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· · ·		05/10/2021		· · ·	
	amendment(s) adoptio		۰. 	· · ·	, if other than the
j date this documen		•	• •		
Effective date if a	05/10/202 nnlicable:				<u> </u>
	· · · · · · · · · · · · · · · · · · ·	. (no more than 90 c	days after amendment	file.date)	
		loes not meet the applical	le statutory filing res	ouir-mente this date wil	I not be listed as the
document's effect	ive date on the Departm	ent of State's records.	one statutory inting rec	quinemente, into une	
•		•	•,		· ·
Adoption of Ame	ndment(s)	(CHECK ONE)	·		
<b>F</b> l The amendmer	u(s) was/were adopted	by the incorporators, or bo	ard of directors witho	ut shareholder action and	d shareholder
action was not	required.			· ·	
		·		he the uncondiment(s)	
The amendment	n(s) was/were adopted    lders was/were sufficie	by the shareholders. The t	sumber of votes ease t	of the intertainents)	•
- 🗋 The amendmer	it(s) was/were approved	by the shareholders throu	igh voting groups. Th	e following statement	•
must be separ	ately provided for each	voting group entitled to ve	ote separately on the c	amenameni(s):	
"The our	nber of votes cast for th	e amendment(s) was/were	sufficient for approv	al	
		、 ・			
by		(voting group)		<del>-</del> '	
·.		11 200 6 8 9 9 7 7			
. •	05/10/2021		•		
	Dated	·	·	· · ·	
		•	· .		• •
	Signature	r, president or other office	- if dimetors or offi	cere have not been	·
	(By a directo selected, by	an incorporator - if in the	hands of a receiver, u	rustee, or other court	•
•	appointed fi	duciary by that fiduciary)			
· ·	Guil	lermo A Flores			
•				- \	
	•	(Typed or printed n	ame of person signing	<u>z)</u>	
•.	Р			. •	·
•	•	(Title of person sig	ning)	······································	. <u></u> ,,,,_
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