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OFFAR MENT OF STATE

OFFAR AT CORPORATIONS

2018 JUL 24 PR 3 18

COVER LETTER

Division of Corporations	*
NAME OF CORPORATION: NATIONAL	Aco Tensport, INC
DOCUMENT NUMBER:	and administration of the production of the contract of the co
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
Stephe	Name of Contact Person
NATTORA C	tate Towsport, FVC
3203 - C	Spewish Vells on
Delmy Beach	4, PL 33445
dr545X2	City State and Zip Code O gwa /
E-mail address: (to be used	d for future annual report notification)
For further information concerning this matter, please	call:
Stepher Leonard	at 609 214-8876
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & □S52.56 Filing Fee Certified Copy (Additional copy is enclosed) □S52.56 Filing Fee Certified copy (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 Taliahassee, FL 32301

Articles of Amendment

Articles of Incorporation

National Auto Transport the	FILED
(Name of Corporation as currently filed with the Florida Dept. of State)	2013 JUL 24 PM 3: 29
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the folits Articles of Incorporation:	SECTION OF STATE FALL AMASSEE, FLORIDA Sying amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp.," Inc.," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A."	must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Leay Beach, FL 3	ells Dr. 3445
C. Enter new mailing address, if applicable: (Mailing address M4 Y BE A POST OFFICE BOX) Delay beaut, FC 334	<u>s Dr</u> 145
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent 3203-C Spanish Wells Dr. (Florida sifee; address)	
New Registered Office Address: Del My Betul FL Florida 3741	<u>{5</u> de;
New Registered Agent's Signature. If changin Registered Agent: I hereby accept the appointment as registered agent. I so familiar with and accept the obligations of the post	uion.
Signature of New Registered Agent, if changing	

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: X Change	<u>PT John</u>	<u>Doe</u>	
X Remove	V Mike	e Jones	
X Add	<u>sv</u> <u>Sally</u>	: Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) K Change	PLEDO	4 Stephen Leonard	3203-c Sprink Wells D.
Add	, , ,		Belong Beach FC
Remove	,		133445
2) X Change	V/COO	JOE Bestelson	7203-c Spanish Hells On
Add	•		Dolary Beach, FC
Remove		- 1101	
3) Change		ELizabeth Steadman	3203 · C Spunh Wells Da
X Add			Delay Berd FL 33445
Remove		. ^	73445
4) Change	\mathcal{P}_{-}	madir Rossins	1615 S. Corpor Ave
Add			• •
Remove			Day Bend, PC 33445
5) Change			
Add			
Remove			
δ)Change			
Add			
Remove			

tach <i>additi</i>	ional sheet	s, if necessary	rticles, enter 7. (Be speci	fic)	· · · · · ·		
		111	** ** *** ** **************************				
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
\	
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 7/1/13	
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)	
(Typed or printed name of person signing)	_
(Typed or printed name of person signing)	
Director President	
Director President (Title of person signing)	