Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

: A & L CARRIER SERVICES INC. Account Name

Account Number: I20110000033 Phone : (786) 360-2879

Fax Number : (786) 362-5270

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN

J L XPRESS CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

AUG 1 1 2014

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: J L XPRESS CORP				
DOCUMENT NUMBER: P13000057127				
The enclosed Articles of Amendmant and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
JOSE LUIS ORTA CLAVIJO				
Name of Contact Person				
J L XPRESS CORP				
11117 W OKEECHOBEE RD STE 201				
Address				
HIALEAH FL 33018				
City/ State and Zip Code				
ALCSINC@AOL.COM				
E-mail address: (to be used for future annual report notification)				
man address. (10 be used for takets burning report notine and it				
For further information concerning this matter, please call;				
A & L CARRIER SERVICES INC at 786 360-2879				
Name of Contact Person Area Code & Daytime Telephone Numb				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				
Amendment Section Amendment Section				
Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				
Tallabassee, FL 32301				

Articles of Amendment

: 17

(Name of Cornaration as currently filed with the Florida Dept. of State) 213000057127 (Document Number of Corporation (if known) ursuant to the provisions of section 607.1006, Florido Statutes, this Florida Profit Corporation adopts the following amendment(s articles of Incorporation: If amending name, cater the new name of the corporation: The new ame must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation Corp., "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BEA STREET ADDRESS.) Enter new mailling address MUST BEA STREET ADDRESS.) L. Enter new mailling address, if applicable: (Mailing address MAY BEA POST OFFICE BOX) Annue of New Registered Agent CARLOS E PRIETO 11117 W OKEECHOBEE RD STE 203 (Florida street address) (Florida street address) New Registered Office Address: HIALEAH Florida S3018 (Cip) Rew Registered Agent's Signature, if chariting Registered Agent:		to	namatéan	14 AUG -8	器 9: 17
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ew Registered Agent's Signature if changing Registered Agent:	_	(City)	•	(Zip Code)	
w Registered Agent's Signature of changing Registered Agent:		\			
hereby accept the appointmental registered agent. I am familiar with and accept the obligations of the position.	New Registered Agent's Signaphic VI c I hereby accept the appointmental redis	nanging Registered Agent: tered agent. I am familiar wit	h and accept the obligation	ns of the position	

Agnature 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 affice 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>T4</u>	John Doc	•
X Remove	<u>v</u>	Mike Jones	
_X Ad∂	<u>sv</u>	Salty Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	JOSE L ORTA-CLAVIJO	11117 w Okeechobb Rd
Add			Ste 203
Remove			Hialeah FL 33018
2) Change	Vρ	ORELVIS MARTINEZ	11117 W Okeechabee Rd
Add			Ste 203
Remove			Hialeah FL 33018
3) Change	p	CARLOS E . PRIETO	11117 W Okeechobee Rd
Add			Ste 201
Removc			Hialeah FL 33018
4) Change			
Add			
Remove			
5) Change			
Add			
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The date of each amendment(s) adoption: 08/08/2014 date this document was signed.	, if other than the
00/00/00 ()	
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 inust be separately provided for each voting group entitled to vote reparately 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 08/08/2914	
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)	
JOSE LUIS ORTA CLAVIJO	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_