# P13000059669

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(Ad	ldress)	
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· (Cit	ty/State/Zip/Phone	e #)
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C. LEWIS

AUG 2 0 2014

EXAMINER

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Car 2 60 Auto transport corp DOCUMENT NUMBER: P13000059 669
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Heidy Rodriquez
Union Carrier Services
5082 NW 74 Ave
Maui Fl 33166
City/ State and Zip Code  Union Callier Selvicosa (opened with E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Leidy Rodriguez at 305, 3921035  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:
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**

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
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Car 2 go Anto transport comp
(Name of Corporation as currently filed with the Florida Dept. of State)
P13000059669
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation;
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  Lehigh Acres, Fl  33974
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Lehigh Aaves, Fl  33976
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  3030 35 5+ 5w  New Registered Office Address:    Vinas   Vinas
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.  Signature of New Registered Agent. if changing

	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
<u> </u>			
	<del>-</del> .		
amendment provides for an exc	schange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)	Rendment if not contained in the amendment itself.		
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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 = 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	PT John Doe
X Remove	<u>V</u> <u>Mike Jones</u>
X Add	SV Sally Smith
Type of Action (Check One)  1) Change Add Remove	Title Name  Address  PD Bladimin Fabelo 13760 Sw 276 St  Homestead, F1  33032
2) Change Add Remove	D Luis & Godoy Vinas 3030 35 St Su (DL Attached) lehigh Acres, Fl 33976.
3) Change Add Remove	
4) Change Add Remove	
5) Change Add Remove	
6) Change Add Remove	