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Amend Mane

COVER LETTER

TO: Amendment Section Division of Corpora					
NAME OF CORPORATION: TVOPICAL TAXI CAS INC DOCUMENT NUMBER: P130000656666					
DOCUMENT NUMBE	r: <u>P130000</u> 4	5666			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
	Munuel	Name of Contact Person			
	1	Name of Contact Person	1		
_	HMENI Cas	+AKICA!	6		
_	3700 Geor	Firm/ Company 919 HVC 3 Address	423		
		Address	01 -011		
_	West Pal	M Beach City/ State and Zip Cod	F1 33405		
		,			
#	INFO @	Americas fA	Kicab. Com		
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Manuel	Carrion	at (<u>56/</u>	, 808-415-9		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>Mailin</u>	ng Address		Address		
Amendment Section			Iment Section		
Division of Corporations		Division of Corporations Clifton Building			
P.O. Box 6327 Tallahassee, FL 32314			Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of Tropical Taxi Cab INC	14 OEC - 1 PH 2
(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:	
PRCTAXI INC	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation of the Aprofessional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3700 Georgia Ave #23 West palm Beach Fl 33405
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3700 Georgia Ave #23 West palm Beach Fl 33405
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address: Name of New Registered Agent 3700 Glova in (Florida street Agent Agent Agent) New Registered Office Address: 1700 Glova in (Florida street Agent) New Registered Office Address:	Parrion Ave #23 WPBF1 33405 en address)
New Registered Office Address: 5700 (Yeorgia)	Ave \$13 WPB, Florida 33 40 5 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I amfamiliar was Signature of New Registered Agent.	ner,

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</u>	John D	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	ones		
_X Add	<u>sv</u>	Sally S	mith		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change	P	_	Aladier S	Osovio	240 Alemada DR Uniflo - Palm springs
Add	•				
Remove			^	1.	1 33461
2) Change	P		Americas	JAX Cab	West Palm Beach
Add	U				West Palm Beach
Remove					F1 33405
3) Change		_			
Add Remove		•			
Kemove					
4) Change		_			
Add					
Remove					
5) Change		-			
Add					
Remove					
6) Change		_			
Add					
Remove					

Attach a	ing or adding additional Artic dditional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
	_	<u> </u>	
		N I A	
		1411	
		T MAN .	Mar
			-
		·	
provisio	endment provides for an exchons for implementing the ameroto applicable, indicate N/A)	ange, reclassification, or condensed in	ancellation of issued shares, the amendment itself:
(1)	о аррисиоте, такие плх)		
		1	
		.,\.\	,
		-N/N	
		 	
		W-7-	

The date of each amendment(s) add	option:	, it other than the
date this document was signed.	1/ -/	
Effective date if applicable:	11/25/2014	
	(no more than 90 days after amehdment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adop action was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adop action was not required.	oted by the incorporators without shareholder action and shareholder	
Dated(25/2014	
Signature	Info (me o	
selected.	rector, plesident or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)	
<u>-</u>	Manuel Carvior (Typed or printed name of person signing)	
_	president	
	(Title of person signing)	