

P13000064781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

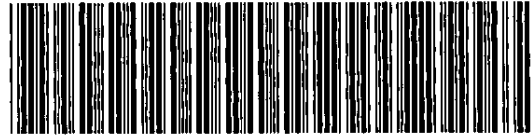
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



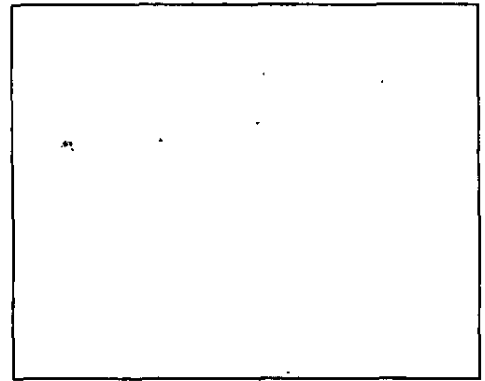
100250064781

08/20/13--01001--016 \*\*160.00

RECEIVED  
DEPARTMENT OF STATE  
OFFICE OF CORPORATIONS  
2013 AUG 19 PM 4:33  
NOTICE OF FILING  
TO ACHIEVE EVIDENCE  
SUFFICIENCY OF FILING

FILED  
13 AUG 19 PM 4:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
C. LEVINS  
AUG 19 2013  
EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC.  
1211 CIRCLE DRIVE  
TALLAHASSEE, FL 32301  
PHONE (850)364-8000



OFFICE USE ONLY

WALK-IN

ENTITY NAME:

CODA AUTO TRANSPORT, INC.

CK# 6065 FOR \$ 160.00 (\$35.00 for this document)

PLEASE FILE THE ATTACHED AMENDMENT & RETURN THE FOLLOWING:

\_\_\_ CERTIFIED COPY

XXX STAMPED COPY

\_\_\_ CERTIFICATE OF STATUS

Examiner's Initials

Articles of Amendment  
to  
Articles of Incorporation  
of

CODA AUTO TRANSPORT, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P13000066244

(Document Number of Corporation (if known))

FILED  
13 AUG 19 PM 4:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:**

*The new name 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 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)

420 N C Street  
Lake Worth, FL 33460

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

420 N C Street  
Lake Worth, FL 33460

**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 DURAN ARROYO, CHRISTIAN O  
420 N C Street

(Florida street address)

New Registered Office Address: Lake Worth, Florida 33460  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and I accept the obligations of the position.*

*Signature of New Registered Agent, if changing*

CHRISTIAN O. DURAN ARROYO, Registered Agent  
By: Kristine Roy, Attorney-in-Fact

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:

☒ Change      PT      John Doe

☒ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>PSTD</u>	<u>DURAN ARROYO, CHRISTIAN O</u>	<u>420 N C Street</u>
<input type="checkbox"/> Add			<u>Lake Worth, FL 33460</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>V</u>	<u>Roy, Kristine</u>	<u>420 N C Street</u>
<input checked="" type="checkbox"/> Add			<u>Lake Worth, FL 33460</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

---

---

---

---

---

---

08/19/2013

FILED

other than the

The date of each amendment(s) adoption: \_\_\_\_\_  
date this document was signed.

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

13 AUG 19 PM 4:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

08/19/2013

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)

CHRISTIAN O. DURAN ARROYO, President

(Typed or printed name of person signing)

By: Kristine Roy, Attorney-in-Fact

(Title of person signing)