Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN PERLA DEL SUR TRANSPORT INC.

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Corporate Filing Menu

C. CARROTHERS 107 I I 7018

COVER LETTER

TO:	Amendment Section	
	Division of Corporation	ΠS

NAME OF CORPORATION: PERLA D	EL SUR TRANSPOR	RT INC		
DOCUMENT NUMBER: P130000793	367			
The enclosed Articles of Amendment and fee are				
Please return all correspondence concerning this	matter to the following:			
LAZARO A. LE	IVA			
	Name of Contact Person			
PERLA DEL SUR TRANSPORT INC.				
Firm/ Company				
Address				
2313 W CORD	ELIA ST			
	City/ State and Zip Code	· ·		
TAMPA, FL 33607				
E-mail address: (to be	e used for future annual report notifi	cation)		
For further information concerning this matter, p	lease call:			
MYRIAM VARGAS				
Name of Contact Person	Area Code &	Daytime Telephone Number		
Enclosed is a check for the following amount ma	de payable to the Florida Departmer	nt of State:		
■ \$35 Filing Fee □\$43,75 Filing Fee & Certificate of Status	s Certified Copy C (Additional copy is c enclosed) (52,50 Filing Fcc Certificate of Status Certified Copy Adultional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendment Division of C Clifton Build 2661 Execut	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

FIGE

Articles of Amendment to Articles of Incorporation

14 JUL 10 AM 11: 36

SECRETARI CE STATE TRALEANIXSSE, FLORIDA

PERLA DEL SUR TRANSPORT INC

(Name of Corporation as currently filed with the Florida Dept. of State) P13000079367 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Fiorida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the cornoration; 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 cantain the word "chartered," "professional association," or the abbreviation "P.A." 2313 W CORDELIA ST B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) TAMPA. FL 33607 C. Enter new mailing address, if applicable; 2313 W CORDELIA ST (Mailing address MAY BE A POST OFFICE BOX) TAMPA, FL 33607 D. If amending the registered agent and/or registered office address in Floridg, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent LAZARO A. LEIVA 2313 W CORDELIA ST (Florida street address) TAMPA New Registered Office Address: (City)

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

I hereby accept the appointment as registered agent. I amfamiliar with and accept the obligations of the position.

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</u>	Jolus Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
_X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	LAZARO A. LEIVA	2313 W CORDELIA ST
Add				TAMPA FL 33607
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change			<u></u>	P
Add				
Remove				

E, It amending 6 (Attach additio	r adding additional Articles, enter change(s) here; nal sheets, if necessary). (Be specific)
··	
F. <u>If an amendn</u> provisions fo (if not ap	nent provides for an exchange, reclassification, or cancellation of issued shares, or implementing the amendment if not contained in the amendment itself: opticable, indicate N/A)

The date of each amendment	k(s) adoption; 07/08/14	, if other than the
date this document was signed		
Effective date if applicable:	07/08/14	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	e cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amondment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	7/8/14	
Signature_	DATE:	-
Š	By a director, president or other officer — If directors or officers have not been elected, by an incorporator — if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	_
	(Typed or printed name of person signing)	
	Presidente	
	(Title of person signing)	_