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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

From:

Division of Corporations

Fax Number : (850) 617-6380

110V 2 5 2016

Account Name : THE ELITE CARRIER SERVICES OF MIAMI LLC

Account Number : I20120000040

Phone Fax Number : (305)405-2600 : (305)405-2601

K. WHITE

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

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN OUICK TRUCKING INC

<u> </u>	
Certificate of Status	0
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Estimated Charge	\$35.00

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Corporate Filing Menu

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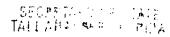
COVER LETTER

TO: Amendment Sec Division of Corp				
NAME OF CORPO	RATION: QUICK TRUCKIN	NG INC		
DOCUMENT NUM	BER: P13000100141			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this mat	tter to the following:		
	SUYLEN RUBIO			
		Name of Contact Person	1	
	THE ELITE CARRIER SER	VICES OF MIAMI		
		Firm/ Company		
	12060 NW S RIVER DR			
		Address		
MEDLEY, FL 33178				
		City/ State and Zip Code	•	
SRU	BIO@ELITECSOM.COM			
		sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
SUYLEN RUBIO		at (305	_) 405-2600	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtiment 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)	
Ал Div 2.C	niling Address mendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301	

P. 003

16 NOV 28 AM 9: 46

Articles of Amendment to Articles of Incorporation of



the Florida Dept. of State) (if known) (it Corporation adopts the following amendmen The new ny," or "incorporated" or the abbreviation of the state of the feesional corporation name must contain the
The new ny," or "incorporated" or the abbreviation
The new ny," or "incorporated" or the abbreviation
The new ny," or "incorporated" or the abbreviation
ny," or "incorporated" or the abbreviation
ny," or "incorporated" or the abbreviation
ny," or "incorporated" or the abbreviation
NTUCKY AVE
UD, FL 34769
da, enter the name of the
Florida Til Call
(Zip Cod≢)
<u>a</u>

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>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	HULDA E IGLESIAS	519 KENTUCKY AVE
Add X Remove			ST CLOUD, FL 34769
2) Change	P	LUIS G ALEMAN	519 KENTUCKY AVE
X Add		-	ST CLOUD, FL 34769
Remove	VP	LUIS G ALEMAN	519 KENTUCKY AVE
Add XRemove			ST CLOUD, FL 34769
4) Change			
Remove 5) Change Add			
Remove			
Add			

(Allech additional sheets, ij	iditional Articles, en f necessary). (Be sp	pacific)			
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If an amendment neavide	u for an evobonoe r	aclassification or ca	nnellation of itemed s	harne	
If an amendment provide provisions for implemen (if not applicable, ind	ting the amendment dicate N/A)	t if not contained in t	he amendment itself:		
· · · · · · · · · · · · · · · · · · ·					
· · · · · · · · · · · · · · · · · · ·		<u>. </u>			

	11/28/2016	
The date of each amendment(s) added this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendn	ent file date)
Note: If the date inserted in this to	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were st	pted by the shareholders. The number of votes car fficient for approval.	st for the amendment(s)
	proved by the shareholders through voting groups. each voting group entitled to vote separately on the	
	for the amendment(s) was/were sufficient for appr	oval
by	(voting group)	
	(voting group)	•
The amendment(s) was/were add action was not required.	pried by the board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder acti	on and shareholder
11/28/2010	5	
Dated		
Signature	helda topesias.	
(Bý a c selecte	irector, president or other officer – if directors or of d, by an incorporator – if in the hands of a receiver ted fiduciary by that fiduciary)	
	HULDA E IGLESIAS	
	(Typed or printed name of person sign	ing)
	PRESIDENT	
	(Title of person signing)	