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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPOR	ATION: MYCAR AL	JTO TRANSPO	RT INC
DOCUMENT NUMB	ER: P1400000056	0	
	f Amendment and fee are su		
Please return all corresp	oondence concerning this ma	tter to the following:	
	Amanda Jaramill	o	
•		Name of Contact Persor	1
,	J.A. Accounting S	Services Inc	
_		Firm/ Company	
	8249 NW 36 ST.	SUITE 209A .M	IAMI FL 33166
-		Address	
	DORAL, FL 3316	66	
-		City/ State and Zip Code	
ama	andajara@hotma	il.com	
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
NI	f Contact Person	at ()de & Daytime Telephone Number
Name o	i Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
	ing Address		Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327			on of Corporations Building
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		-	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

FILED

14 HAR 31 FE 3: 24

MYCAR AUTO TRASPORT INC

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

P1400000560 (Document Number of Corporation (if known)

ndment(s) to

Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit 6	Corporation adopts the following amendme
A. If amending name, enter the new na	me of the corporation:	
		The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co". A profes.	" or "incorporated" or the abbreviation sional corporation name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if appli		•
(Maning dearess MIXIX BEATTON)		_
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida,	enter the name of the
Name of New Registered Agent	Amanda I Jaramillo	
	8906 W Flagler St. # 219	
	(Florida street address)	
New Registered Office Address:	Miami	, Florida 33174
	(City)	(Zip Code)
	ered agent. I am familiar with and accept	
Si	gnature of New Registered Agent, if changi	ng

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.

X Change	<u>PT</u>	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	VP	MARIA E CASTELLANOS	8181 NW 36 ST.
Add Add			DORAL, FL 33166
Remove			
2) Change	Р	YOEL S RAMOS	3830 SW 145 PL
✓ Add			MIAMI, FL 33175
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Ar Attach additional sheets, if necessary)). (Be specific)
	·····
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	.
If an amendment provides for an expressions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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):	r
"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_MARCH 26, 2014	
Dated No Colonia Colonia	
Signature X / De Course of the 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)	
MARIA E CASTELLANOS	
(Typed or printed name of person signing)	
VP	
(Title of person signing)	