P14000002977

(Re	equestor's Name)	• • • • • • • • • • • • • • • • • • • •		
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COVER LETTER

Division of Corporations NAME OF CORPORATION: E.F. R Transport, Inc P1400000 2977 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company m. efrtrans o gmail. com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Suarez at (786) 620-6961 Area Code & Daytime Telephone Number Maria Enclosed is a check for the following amount made payable to the Florida Department of State: **□**\$52.50 Filing Fee □\$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Street Address** Mailing Address Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

FILED.

Articles of Inc	orporation File-Diagram	
E.F. R Transport, Inc	2015 JAN 20 PM 4: 10	
(Name of Corporation as currently filed with the F	lorida Dept. of State) CECHE VARY OF STATE	
P1400000 2977	Interior State SECRETARY OF STATE	
(Document Number of Corporation (i		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen	t(s) to
A. If amending name, enter the new name of the corporation:		
EFR Trans, Inc.	m.	
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 "corp.	Co". A professional corporation name must contain the	
word "chartered," "professional association," or the abbreviation "	•	
B. Enter new principal office address, if applicable:	15464 SW 143rd ST	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami, FL 33196	
	1.11am 1 10 33110	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15464 SW 143rd ST	
	Miami, FL 33196	
	1	
D. If amending the registered agent and/or registered office addrnew registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stre	nat addrans)	
(1 to tale site	ici uuur ess)	
New Registered Office Address:	, Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	ide and a second of the control of	
I hereby accept the appointment as registered agent. I am familiar w	an unu accept the obligations of the position.	
Signature of New Registered A	gent, 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>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>mes</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		***************************************
Add				
Remove				
3) Change	···			
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		→		
Add				
Remove				
6) Change				
Add		_		
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
 -	
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an analysis of the indicate of the same of the
(if not applicable, indicate N/A)	
	West Warrant

date this document was signed.	_, if other than the
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):	
"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 1/15/2015 Signature Waria Sugren	
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 Suarez (Typed or printed name of person signing)	_
Vice President	_
(Title of person signing)	