P14000007962

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SHOW TARY OF STATE

STATE - 7 PM 12: L

C. LEWIS

AUG 1 9 2014

EXAMINITER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:LEMA & SONS TRASNPORT, INC							
DOCUMENT NUMBER:	P14000007962						
The enclosed Articles of Am	endment and fee are sul	bmitted for filing.					
Please return all corresponde	ence concerning this mat	tter to the following:					
	ALA	AN MARTINEZ					
		Name of Contact Person					
		SIMPLEX GROUP					
 		Firm/ Company					
		5800 NW 74TH AVE					
		Address					
		MIAMI, FL 33166					
		City/ State and Zip Code					
	an	martinez@simplexgroup.net					
E	E-mail address: (to be us	sed for future annual report notification)					
For further information conce	erning this matter, pleas	e call:					
ALAN MARTINEZ / SIN	MPLEX GROUP	305 599-8287					
Name of Con	tact Person	at () Area Code & Daytime Telephone Number					
Enclosed is a check for the fo	ollowing amount made p	payable to the Florida Department of State:					
S35 Filing Fee	3\$43.75 Filing Fee & Certificate of Status	□\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

PGLED PATER SHARE TARY OF STATE SINGLE OF CORPORATIONS

14 AUG -7 PM 12: 41

LEMA & SONS	TRASNPORT, INC		14 "	100	
(Name of Corporation as cur	rently filed with the Flo	orida Dept. of State)			_
P140	00007962				
(Document No	imber of Corporation (if	known)			_
Pursuant to the provisions of section 607.1000 its Articles of Incorporation:	5, Florida Statutes, this F	lorida Profit Corpora	tion ado	pts the followin	g amendment(s)
A. If amending name, enter the new name	of the corporation:				
					_The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designatio word "chartered," "professional association,	n "Corp." "Inc," or "C	Co". A professional c			bbreviation
B. Enter new principal office address, if a	pplicable:	331 CYPRESS	331 CYPRESS WAY W		
(Principal office address <u>MUST BE A STRE</u>		PALM SPRING	S, FL 33	406	_
					-
					_
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF		331 CYPRESS WAY W			
	<u> </u>	PALM SPRING	-		
					_
		-			_
D. If amending the registered agent and/or new registered agent and/or the new re	registered office address:	ess in Florida, enter t	he name	of the	
	gistered office address.				
Name of New Registered Agent					
	331 CYPRESS WAY (Florida street				
V D	PALM SPRINGS			00400	
New Registered Office Address:	(City)	, F	lorida	33406 (Zip Code)	-
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		ith and accept the obli	nations /	of the position	
mo obj uccepi me appointment as registered	ugem. 1 um jumuun w	ин ини иссері іне оди	gunons (у те ромпон.	
Signat	ure of New Registered A)	gent, if changing			
217		3 / / VI / / / / / / / / / / / / / / / /			

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 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	CARLOS M LEMA MARTINEZ	331 CYPRESS WAY W
Add			PALM SPRINGS, FL 33406
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pamaya			

ttach ad	ditional sheets	additional Arti s, if necessary).	(Be specific	c)			
					 		
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		<u> </u>					
							
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	- -						<u>. </u>
'an ame Tovision	<u>ndment provi</u> ns for implem	ides for an exch tenting the ame	ange, reclas	sification, or	cancellation on the amenda	of issued share	<u>:s.</u>
(if no	ot applicable,	indicate N/A)	nament ii no	t contained i	ii the amendi	icit tiscii.	
•		,					
							
	<u>-</u>					-	

	08/04/14	FILL RESERVED	OF STATE SEFORATIONS	
The date of each amendment(s) adoption: _ date this document was signed.	, ,	TO HOLENAGE		_, if other than the
Ţ.	00/04/44	14 AUG -7	PH 12: 42	
Effective date if applicable:	08/04/14			_
	(no more than 90 days af	ter amendment file date,		
Adoption of Amendment(s) (C	HECK ONE)			
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number approval.	of votes cast for the ame	endment(s)	
The amendment(s) was/were approved by t must be separately provided for each voting				
"The number of votes cast for the am	endment(s) was/were sufficie	nt for approval		
by		,,,		
(v	oting group)			
The amendment(s) was/were adopted by the action was not required.	e board of directors without s	hareholder action and sl	nareholder	
The amendment(s) was/were adopted by the action was not required.	e incorporators without share	holder action and sharel	nolder	
Dated 08/04/14 Signature (X)				
(By a director, pythological selected, by an income	esident or other officer – if di corporator – if in the hands o ry by that fiduciary)	rectors or officers have a f a receiver, trustee, or o	not been other court	_
	CARLOS M LE	EMA MARTINEZ		
	(Typed or printed na	me of person signing)		_
	PRESIDEN	Т		
	(Title of pers	on signing)		_