## P140000 28908

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: CDA TRANSPOR	T GROUP CORP	
DOCUMENT NUMI			· · · · · · · · · · · · · · · · · · ·
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DARIANA LORENZO		
		Name of Contact Perso	on
	D&D BEST SERVICES INC	;	
		Firm/ Company	
	8300 NW SOUTH RIVER D	R STE #230	
	<u> </u>	Address	
	MEDLEY, FL 33166		
		City/ State and Zip Co	de 😅
1.1			de Si
ddser	vices07@outlook.com		•
	E-mail address; (to be u	sed for future annual repor	
For further informatio	n concerning this matter, pleas	se call:	ћм 9: 5 <i>9</i>
D&D BEST SERVIC	ES INC	786	277-5038
Name of Contact Person Area Code & Daytime Telephone Number		ode & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Dep	partment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amer Divis Clifte	t Address Idment Section Ion of Corporations In Building Executive Center Circle

Tallahassee, FL 32301

TORK FACT OF STATE

## Articles of Amendment to Articles of Incorporation of

CDA TRANSPORT GROUP CORP

P14000028908	rporation as currently	filed with the Florida Dept. of State)		
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this F	Florida Profit Corporation adopts the following	g amendi	ment(s
A. If amending name, enter the new name of	of the corporation:			
			_The n	-
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	"Corp," "Inc," or "C	Co". A professional corporation name must		
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE			<del></del>	_
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3525 ELIZABETH ROAD	19	- *25 <b>.2</b> 
		LAKE WORTH, FL 33461	.5. .5. 	- 3至 - 3至
				: '∹ @:~ -
D. If amending the registered agent and/or new registered agent and/or the new reg			19:59	11730 11V1S -
Name of New Registered Agent CARLOS DELGADO				SKO E
	5 ELIZABETH ROAD			
	(Florida stre	et address)	_	
1 41	CE WORTH	, Florida		
New Registered Office Address:	<del></del>	(City) (Zip		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = C. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. Ther 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 Char Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doc	
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	WILFREDO SERRANO	2637 FLORIDA ST
Add			WEST PALM BEACH, FL 33406
X Remove			
2) Change	p	CARLOS DELGADO	3525 ELIZABETH ROAD
X Add			LAKE WORTH . FL 33461
Remove			
3) Change			
Add			
Remove			
1) Change			
4) Change			
Remove			
Remove			
5) Change	<u> </u>		
Add			
Remove			<del></del>
6) Change			
Add			
Remove			
1\011010			

I amending or adding additional Artic Attach additional sheets, if necessary).	
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
•	

. The date of each amendment(s) ad	02/26/2019	, if other tha
date this document was signed.	opnon	, , ,, o,,,e, ,,,,
02/26	5/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(,)	
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this dapartment of State's records.	te will not be listed a
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoreby the shareholders was/were suf	pted by the shareholders. The number of votes east for the amendment(sficient for approval.	3)
	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	rni
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholde	er
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
02/26/2019 Dated		
Signature <u>U</u>		
	rector, president or other officer - if directors or officers have not been	<del></del>
	<ul> <li>by an incorporator – if in the hands of a receiver, trustee, or other cour</li> <li>d fiduciary by that fiduciary)</li> </ul>	t
•	WILFREDO SERRANO	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	<del></del>