P140000356444

· (Re	equestor's Name)
(Ad	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(B	usiness Entity Name)
(D	ocument Number)
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ADR 4/7/15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BAEZ MOV	ING & DELIVE	RY, INC
DOCUMENT NUM	_{BER:} P1400003564	4	
	of Amendment and fee are su		
Please return all corre	espondence concerning this ma	tter to the following:	
	JORGE SALAS		
		Name of Contact Person	1
		Firm/ Company	
	9155 NW 36 AVE	NUE	
		Address	
	MIAMI FL 33147		
		City/ State and Zip Cod	e
	E-mail address: (to be us	ed for future annual report	notification)
	, ,		
For further information	n concerning this matter, pleas	e call:	
		at (786	, 955-4745
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle essee, FL 32301

Articles of Amendment to **Articles of Incorporation**

FILED

2015 APR - 3 PM 3: 07

BAEZ MOVING & DELIVERY INC

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

P14000035644

(Document Number of Corporation (if known)



nent(s) to

name must he distinguishable and cont "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ation "Corp," "Inc," o	r "Co". A professional	'incorporated" or the abbrev corporation name must conta
3. Enter new principal office address, i Principal office address <u>MUST BE A ST</u>		2301 NW 9	9 STREET
		MIAMI, FL	33147
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2301 NW 99 STREET	
		MIAMI FL 3	33147
. If amending the registered agent and new registered agent and/or the new	l/or registered office ac registered office addr	ldress in Florida, enter ess:	the name of the
Name of New Registered Agent	DOMINGUEZ,	HAMLETT	
	2301 NW 99 S	STREET	
	(Florida	street address)	 _
	MIAMI		Florida 33147
New Registered Office Address:		ity)	(Zip Code)

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 <math>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>	Name	<u>Addres</u> s			
1) Change	P/D	DOMINGUEZ, HAMLETT	2301 NW 99 STREET			
Add						
Remove			MIAMI, FL 33147			
2) Change	P/D	DIAZ, OSNIEL	8920 NW 33 AVENUE RD			
Add						
Remove			MIAMI, FL 33147			
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

(Attach /	ding or adding addit additional sheets, if ne	ecessary). (Be si	ecific)	<u>. c</u> .		
	•	•	3 /			
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	<u> </u>		·			
*****			· · · · · · · · · · · · · · · · · · ·			
		-				
				- · · · -		
						
lf an ar	nendment provides f	or an exchange, r	eclassification, o	r cancellation of i	issued shares.	
provis	ions for implementin	ig the amendment	if not contained	in the amendmen	nt itself:	
(if	not applicable, indica	ate N/A)				
			·			
			<u> </u>		<u> </u>	

The date of each amendmen	t(s) adoption: 03/27/2015	, if other than th
date this document was signed	•	
Effective date if applicable:	03/27/2015	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wes by the shareholders was/wes	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
The amendment(s) was/wei	re approved by the shareholders through voting groups. The following statement ed 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_03/3	0/2015	
Signature	6	_
se	y a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	OSNIEL DIAZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	