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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: TRAMI EXPRESS	S, CORP			
DOCUMENT NUMI	BER: P14000055837				
	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	SUSANA ALDANA				
		Name of Contact Person	n		
	TRAMI EXPRESS, CORP				
		Firm/ Company	 		
	9772 SW 24TH ST				
	Address				
	MIAMI, FL 33165				
		City/ State and Zip Cod	c		
TRAI	MIEXPRESS97@GMAIL.CC	ЭМ			
		sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
SUSANA ALDANA		305			
Name (of Contact Person	at (305) 333-1011 Area Code & Daytime Telephone Number			
Enclosed is a check fo	r 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)		
Mailing Address			Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

TRAMI EXPRESS, CORP

FILED

P14000055837	ation as currently filed with the Florida Dept. of State)
(Duc	rument Number of Corporation (if known). 12.1.7.1.7.2.7.5.5.7. E. MLEAHASSEE, FECHETA
Pursuant to the provisions of section 607.1006, Flor	FIGURE ACTIONS rida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendments
ts Articles of Incorporation:	
A. If amending name, enter the new name of the	corporation:
	The new
	word "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the he abbreviation "P.A."
3. Enter new principal office address, if applicat	
Principal office address <u>MUST BE A STREET AI</u>	DDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	BOX)
 If amending the registered agent and/or registered agent and/or the new registered. 	stered office address in Florida, enter the name of the ed office address:
·	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
in the parties of the control of the	(City) (Zip Code)
ew Registered Agent's Signature, if changing R	Registered Agent:
	t. I am familiar with and accept the obligations of the position.
Si	ignature of New Registered Agent, 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 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>	Address
1) X Change	P	ALICIA B. DIAZ	18261 SW 112TH AVE
Add			MIAMI FL 33157
Remove			
2) Change	P	SUSANA ALDANA	18261 SW 112TH AVE
Add			MIAMI FL 33157
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•	12/07/2018	
	(s) adoption:	, if other than th
date this document was signed.		
Effection data if and inchin	12/07/2018	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date to Department of State's records.	will not be fisted as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/werby the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
·//	(voting group)	
action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder	
12/07/		
		
	Film	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	SUSANA ALDANA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	