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2-13-15

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPO	RATION: All CO	AST EX	PRESSI	NO
DOCUMENT NUMI	BER: P14000C	25+007		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Agust ?	V lope Z Name of Contact Person	1	
	All COAST	EXPIZESS Firm/ Company	INC	_ _
	10000 NW	BO AVE Address		
	HPALEAH C	City/ State and Zip Code	= + (3301	6
<u> </u>	E-mail address: (to be us	PRESS @ g sed for future annual report	MACI. COM notification)	
For further informatio	n concerning this matter, pleas	se call:		
Agusten	10PEZ	at (\\ \\ \\ \	631 - 595 6	ı
Name	of Contact Person	Area Co	de & Daytime Telephone Nun	nber
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S \$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)	
	iling Address endment Section		Address Iment Section	
	ision of Corporations		on of Corporations	

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

All COAST EXPRESS INC. (Name of Corporation as currently filed with the Florida Dept. of State)

15 FEB 10 PM 3: 59

P1400005+00

(Document Num	ber of Corporation (if ki	nown)	
Pursuant to the provisions of section 607.1006, as Articles of Incorporation;	Florida Statutes, this Fla	orida Profit Corporation	adopts the following ar
A. If amending name, enter the new name of	the corporation:		
			TX
name must be distinguishable and contain the Corp" "Inc" or Co" or the designation word "chartered," "professional association,"	"Corp." "Inc." or "Co	". A professional corp 1."	rporated" or the abbr
	· · · · · · · · · · · · · · · · · · ·		•
B. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>	T ADDRESS)		
			 -
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFIC			
			•
	-		
 If amending the registered agent and/or r new registered agent and/or the new registered. 		s in Florida, enter the	name of the
new registered agent and/or the new regis	tered office address:		
Name of New Registered Agent			<u>—</u>
			
	(Florida street	address)	
New Registered Office Address:	· 	address) Flor	
	(Florida street (City)	ŕ	ida(Zip Code)
	· 	ŕ	
	(City)	ŕ	

Signature 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.

Process	s, ana san	ty smun, SV as an Ada.	
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	VP	ANTONIO LOPETEGUP	10000 NW 80 AVE
Add			HPALEAH GARDENS, F1330
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
I LIGHTOYE			

amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)		
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		<u> </u>	. <u> </u>
	•	The second of the second	
an amendment provides for an exch rovisions for implementing the ame	ange, reclassification, on andment if not contained	or cancellation of issued shares. I in the amendment itself:	1
(if not applicable, indicate N/A)		•	
			_

The date of each amendment(s) adoption: _ date this document was signed.	2/6/15	FALEU SECRETARY OF SHALL DIVISION OF CORPORATIONS	, if other than the
Effective date if applicable:		15 FEB 10 PM 3: 59	
	(no more than 90 days c	fter amendment file date)	
Adoption of Amendment(s)	HECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient fo	e shareholders. The numbe r approval.	r of votes cast for the amendment(s)	
The amendment(s) was/were approved by must be separately provided for each voting			
"The number of votes cast for the am		ent for approval	
by		·	
(v	oting group)		
The amendment(s) was/were adopted by the action was not required.	e board of directors without	shareholder action and shareholder	
The amendment(s) was/were adopted by th action was not required.	e incorporators without shar	eholder action and shareholder	
Dated 2/6//	5	·	
Signature A	lufo		
selected, by an in	esidenyor other officer – if d corporator – if in the hands	irectors or officers have not been of a receiver, trustee, or other court	
	ry by that fiduciary)		
A	RUSTIAN C (Typed or printed no	OPEZ	
`	(Typed or printed na	ame of person signing)	
	PRESPOEN	+	
	(Title of per	rson signing)	