P14 0000 60685

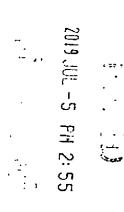
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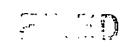
COVER LETTER

TO: Amendment Section Division of Corporations

į,

NAME OF CORPO	RATION:MALAGA TRAN	NS INC.			
DOCUMENT NUM	P14000060685				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	WALTER V. MALAGA				
		Name of Contact Person	1		
	MALAGA TRANS INC.				
		Firm/ Company			
	9723 N. NEW RIVER CANA	AL RD. # 414			
		Address			
	PLANTATION, FL 33324				
		City/ State and Zip Code	<u>. </u>		
TIOV	VALTER54@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call: at (205-8128		
Name of Contact Person)de & Daytime Telephone Number		
	or the following amount made		,		
\$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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of



MALAGA TRANS INC.

2019 JUL -5 PM 2:55

(<u>Name g</u>	of Corporation as currently filed with the Florida Dept. of State).			
MALAGA TRANS INC.				
	(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following ame	ndn		
A. If amending name, enter the new na	ame of the corporation:			
		ne		
	tain the word "corporation," "company," or "incorporated" or the abbrevi- nation "Corp," "Inc," or "Co". A professional corporation name must contai	iatie		
B. Enter new principal office address,	if applicable:			
(Principal office address MUST BE A S				
		_		
C. Enter new mailing address, if appli	icable:			
(Mailing address MAY BE A POST)				
				
D. If amending the registered agent an	nd/or registered office address in Florida, enter the name of the			
new registered agent and/or the new				
Name of New Registered Agent	WALTER MALAGA			
Think of the his general section	9723 N. NEW RIVER CANAL RD. # 414, PLANTATION, FL 33324			
	(Florida street address)			
	t 4, Plantation Florida 33324			
<u>New Registered Office Address</u> :	(Zip Code)			
	•			
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regist	tered agent.—I am familiar with and accept the obligations of the position.			
	Galt.			
	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, nat 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 Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of eacheld. 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. 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 C Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	P	STEFFANO B. MALAGA	1611 Winterberry Lane	
Add X Remove			Weston, FI 33327	
2) X Change	PTS	WALTER V. MALAGA	9723 N. New River Canal Rd. 414	
Add			Plantation, Fl 33324	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	essary). (Be specific	. /			
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	an evehange reclas	sification or cap	cellation of issued	l shares.	
n amendment provides for	d to the	t contained in th	e amendment itse	lf:	
n amendment provides for	the amendment if no				
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JULY 3, 2019	
The date of each amendment(s) adoption:	, if other
date this document was signed.	
JULY 3, 2019	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	u(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	тен
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by" (voting group)	
 The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. 	lder
JULY 3, 2019	
DatedSignature	
(By a director president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other components appointed fiduciary by that fiduciary)	
WALTER V. MALAGA	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	