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DEC 10 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DLG TR. DOCUMENT NUMBER: P14000061	ANSPORT, CORP 028	
The enclosed Articles of Amendment and fee at		
Please return all correspondence concerning this	s matter to the following:	
SILVIA VILA		
	Name of Contact Person	1
ELAN BUSINE	SS SERVICES CO	ORP
4	Firm/ Company	
1116 CEDAR I	FALLS DR.	
	Address	
WESTON, FL	33327	
	City/ State and Zip Cod	e ,
SVILA@ELANSEF	RVICE COM	
_	be used for future annual report	notification)
· ·	•	,
For further information concerning this matter, p	please call:	,
SILVIA VILA	at (954	, 217-6080
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Depa	urtment of State:
\$35 Filing Fee Certificate of State		□\$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	Ameno Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

FILED

14 DEC -4 PM 12: 26

DLG TRANSPORT, CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P14000061028

nendment(s) to

(Document Number of Corporation	n (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amend		
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," oword "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation name must contain		
B. Enter new principal office address, if applicable:	4474 DAVIE RD STE 290		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	WESTON, FL 33331		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4474 DAVIE RD STE 290 WESTON, FL 33331		
D. If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr Name of New Registered Agent			
(Classide	aturat adduran		
	street address)		
New Registered Office Address: (Ci	, Florida ity) (Zip Code)		
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia Signature of New Registere	ar with and accept the obligations of the position.		

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.

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	PS	Lovera Gonzalez, Diego A.	4474 Davie Rd Ste.290
Add			Weston, FL 33331
Remove			
2) Change	VT	Dalahoz, Rafael Enriquez	14601 Vista Verdi Rd
Add			Davie, FL 33325
Remove			
3) Change			
Add			
Remove			
4) Change			
Add Add			
Remove			·
5) Change			
Add			
Remove		•	
Kemove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary)	ticles, enter cha . (Be specific)			
	(1.1.3)			
-				
				. = :
				
		<u> </u>		
				
an amendment provides for an exc	change, reclassi	fication, or can	cellation of issue	d shares.
rovisions for implementing the am	endment if not	contained in th	ie amendment its	elf:
(if not applicable, indicate N/A)				
				. =

The date of each amendment(s) adoption: 10/01/2014	, if other than the
date this document was signed.	
Effective date if applicable: 10/01/2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)	
he 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.	
Dated_10/03/2014 Signature	
(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 court	
appointed fiduciary by that fiduciary)	
RAFAEL ENRIQUE DELAHOZ	
(Typed or printed name of person signing)	
VICE-PRESIDENT, TREASURER	
(Title of person signing)	