## P1400006/2237

(1	Requestor's Name)				
(,	Address)				
(,	Address)				
(1	City/State/Zip/Phone #)				
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(	Business Entity Name)				
(Document Number)					
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: MOVING AMERICA XPLESS CODOCUMENT NUMBER: P140000 61227	e`
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Heldy Rodliquez Name of Contact Person	
Union Carrier	
5082 NW 74 AU	
MANI F1 33166	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	İ
For further information concerning this matter, please call:	
Herdy Lodriquez a, 305, 392 1035	
Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section  Street Address Amendment Section	
Americanical Section Americanical Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
Articles of Incorporation FILED
Moving America XPress John PH 4: 44
(Name of Corporation as currently filed with the Florida Dept. 8f State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  8355 West Flager St. Suite 150
Name of New Registered Agent  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  (City)  (City)  (City)  New Registered Office Address:  (City)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
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 <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:	e, and saily sillin			
X Change	PT John I	Doe C	iace	up to
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	cage Presid	ent.
X Add	SV Sally	<u>Smith</u>	1. reacci	
Type of Action (Check One)  1)	Title	Lester le	eiva -	8355 west flaglerst suite 150
Add Remove	0	0.00106.00	Ē	11 Aui F( 33 144
2) Change Add Remove		Onestes Ag		8355 West Plaglers) Surte 150 Mari Fl 33144
3 ) Change Add				
Remove 4) Change Add			<del></del>	
Remove  5) Change  Add				
Remove 6) Change			-	
Add Remove				
ACHIOVE			_	

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<u>.                                    </u>	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable indicate N/A)	
(if not applicable, indicate N/A)	•
(tj noi applicable, indicale N/A)	
, (у пос аррисавіе, іпаісаіе IV/A)	
у пот аррисаоте, такате 1974)	
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у (у пос аррисаоте, таксате 1974)	
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, (у пог аррисавіе, іпаісаіе ім/А)	
, (ij noi applicable, inaicale IV/A)	

The date of each amendment(s) adoption:	629	1/2	015	, if other than the
date this document was signed.  Effective date if applicable:  (no	Q more than 9	29 days af	DD IS	file date)
Note: If the date inserted in this block does not me document's effective date on the Department of State		ıble stat	utory filing req	uirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK	(ONE)			
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approx		number	of votes cast for	the amendment(s)
☐ The amendment(s) was/were approved by the shar must be separately provided for each voting group.				
"The number of votes cast for the amendmen	nt(s) was/were	sufficie	ent for approval	
by(voting g				<b>33</b>
(voting g	roup)			
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors	vithout :	shareholder acti	on and shareholder
Dated	2			
(By a director, president selected, by/an incorpora appointed inductary by the	ator – if in the			
	nesta			لد
(Туре	ed or printed n	ame of 1	person signing) Le De	ut
<del></del>	(Title o	f person	signing)	