PIUDDOM90

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(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporation			
NAME OF CORPORATION	ON MY WAY	TRANSPORTA	ATION CORPORATION
DOCUMENT NUMBER:	P14000069	190	
The enclosed Articles of Am	nendment and fee are subm	nitted for filing.	
Please return all corresponde	ence concerning this matter	r to the following:	
FELIX U ESI	PINOSA		
		(Name of Contact Person	1)
ON MY WAY	TRANSPC	RTATION	CORPORATION
		(Firm/ Company)	
14504 POIN	TE EAST TR	PAIL	
	· .	(Address)	
CLERMONT	, FLORIDA	34711	
		(City/ State and Zip Cod	e)
TAIM'	Y@GANDIA	INSURANC	CE.COM
	-mail address: (to be used		
For further information conc	erning this matter, please	call:	
FELIX U ESI	PINOSA	_{at (} 201	, 424-6629
(Name of Co	ntact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the f	following amount made page	yable to the Florida Depa	artment of State:
■ \$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			Address Iment 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 to Articles of Incorporation

of

FILED

15 JAN -9 湖间: 13

ON MY WAY TRANSPORTATION CORPORATION

TALEATIASSES, FLORIDA

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

P14000069190

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

	N/A	The r
name must be distinguishable and contain the "Company" or "Co." may not be used in the	e word "corporation" or "incorporated" or ename.	the abbreviation "Corp." or "In
B. Enter new principal office address, if a	pplicable: 14504 POINTE	EAST. TRAIL
(Principal office address <u>MUST BE A STRI</u>		_ 34711
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)		EAST TRAIL
	CLERMONT, FI	L 34711
new registered agent and/or the new re Name of New Registered Agent:	gistered office address:	
New Registered Office Address:	(Florida street address)	
1	4504 POINTE RAST TRAIL	Florida CLERMONT, FL 34711
	(City)	(Zip Code)
	ging Registered Agent:	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered	d agent. I am familiar with and accept the o	bligations of the position.

Page 1 of 4

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: X_Change X_Remove X_Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	Р	FELIX U ESPINOS	
Add			CLERMONT, FL 34711
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
			 ,
Remove			
6) Change			
Add			
Remove			

(attach additional sheets, if necessary).	(Be specific)			
			<u> </u>	
				·-
		. =		
				
		*** *		

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date this document was signed.	option:	, ii other than th
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.	
Dated Signature (By the chair have not been		
FELIX U E	SPINOSA	
	(Typed or printed name of person signing)	
PRESIDE	NT	
	(Title of person signing)	