

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500313349775

05/18/18--01024--014 **52.50

10-JUN 11 PH 2:58

TENER STATE

R. WHITE JUN 1 1 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DEEinspecta Trans	sportation Services Inc.		
DOCUMENT NUMB	ER: P14000069269		<u></u>	
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Jason Edwards			
•		Name of Contact Person	_	
	DEEinspecta Transportation	Services Inc.		
	· ·	Firm/ Company		
	8545 Claridge drive	- · ·		
		Address		
	miramar Florida 33025			
,	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code		
jedwa	rds441@gmail.com			
<u></u>		sed for future annual report	notification)	
For further information	econcerning this matter, pleas	se call:		
Cliff Simpson		954 at (4881982	
Name o	of Contact Person	at (954) 4881982 Area Code & Daytime Telephone Numb		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
P.O. Box 6327 Clifton Buildin		ment Section n of Corporations		

Tallahassee, FL 32301



May 21, 2018

JASON EDWARDS 8545 CLARIDGE DR MIRAMAR, FL 33025

SUBJECT: DEEINSPECTA TRANSPORTATION SERVICES, INC.

Ref. Number: P14000069269

We have received your document for DEEINSPECTA TRANSPORTATION SERVICES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate suffix must be added to the corporate name throughout the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 518A00010564

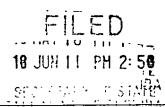
RECEIVELT

18 JUN II PM 2: 34
SECRETARY OF STATE
TALLAHASSEE, 1 PM

www.sunbiz.org

D C DOW 4445 D 11 1

Articles of Amendment to Articles of Incorporation of



DEEinspecta Transportation Services Inc.

(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
P14000069269	
(Downwart Num	nber of Corporation (if known)
(Document Num	net of Corporation (it known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation Ultimate Cargo Trans Services Incorporated U	Itimate Caran Trans Services The new
name must be distinguishable and contain the word "corpo" "Corp.," "Inc." or Co.," or the designation "Corp." "Inc." word "chartered," "professional association." or the abbrevia	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered of fice ad	e address in Florida, enter the name of the
new registered agent and/or the new registered of tice ad	INITESS.
Name of New Registered Agent	
	rida street address)
New Registered Office Address:	, Florida
	(c, n_i) (z, p, ode)
New Registered Office Address:	(City) , Ffortda, (Zip Code)
	Agenti
New Registered Agent's Signature, if changing Registered a I hereby accept the appointment as registered agent. I am fan	Agent. niliar with and accept the obligations of the position.
And the state of t	
	At the state of the same of the same time.
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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Jason M Edwards	
Add Remove			
2) Change	P	Jackie Lampley	1511 NW 91st. Ave
✓ Add			Coral Springs FL. 33071.
Remove 3.) Change	<u>T</u>	Jason N Edwards	
Add Remove			
4) Change Add			
Remove			
5/ Change			
Remove			
6) Change			
Add			

						_
					_	
		<u> </u>				
					-	
-						
	<u></u> _					
	 .				-	
		<u> </u>				
f an amendment provides for an excha	mge reclassifica	tion, or cance	llation of iss	ued shares.		
provisions for implementing the amen	dment if not cor	tained in the	amendment	itself:		
(if not applicable, indicate N/A)						
		-			,	
	-					
						
		-				

	05/10/2018	ic de die de
The date of each amendment(s) a date this document was signed.	adoption:	, if other than th
•	710/2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	ient(s)
☐ The amendment(s) was/were apmost be separately provided for	oproved by the shareholders through voting groups. The following stops each voting group entitled to vote separately on the amendment(s).	tlement :
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required. The amendment(s) was/were a	dopted by the board of directors without shareholder action and share dopted by the incorporators without shareholder action and sharehold	
action was not required.		
05/10/20 Dated	18 Jon 92	
(By 8 selec	director, president or other officer – if directors or officers have not ned, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	
	Jason Edwards	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	