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COVER LETTER

Division of Corporations NAME OF CORPORATION: TAXI YELLOW CAB, INC DOCUMENT NUMBER: P14000089895 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANA M. SILVERIO Name of Contact Person TAXI YELLOW CAB, INC Firm/ Company 11050 SW 196 ST UNIT 108 Address MIAMI, FL 33157 City/ State and Zip Code silverioana@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>305-</u>) <u>336-6243</u> Area Code & Daytime Telephone Number ANA M. SILVERIO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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				
	Articles of Incorporation of	15	FEB -S	P# 2: 57	
Taxi Pellow	CAn, IN		1	; , t	
(Name of Corporation as curr	rently filed with the Florida Dept. of St	ate)	PACEPALL COME	· i hothick	
	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
(Document Nu	mber of Corporation (if known)				
Pursuant to the provisions of section 607,1006 its Articles of Incorporation:	, Florida Statutes, this Florida Profit Co.	rporation a	dopts the fo	llowing amendment(
A. If amending name, enter the new name of	of the corporation:				
				The new	
word "chartered," "professional association, B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>	plicable:				
C. Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF					
D. If amending the registered agent and/or new registered agent and/or the new reg		nter the na	me of the		
		nter the na	me of the		
new registered agent and/or the new reg	zistered office address:	nter the na	me of the		
new registered agent and/or the new reg		nter the na	me of the		
	zistered office address:	nter the na	-		

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.

Evample:	e, ana sai	ay Smun, Sv as an Aaa.	
Example: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		ANATALIA SILVERIO	11050 SW 196 ST # 108
Add			MIAMI , FL 33157
· Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
REMOVE ARTICLES III U.T.S. T	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ң погаррисате, такие WA)	

The date of each amendment	t(s) adoption: FEBRUARY 4 2015	if other than the
date this document was signed	•	
Effective date if applicable:	FEBRUARY 4 2015	
in apparation.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Fhe amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_FE	BRUARY # 2015	
Signature _	(Ma M. Dilurio	
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	ANA M. SILVERIO	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)