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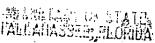
TO: Amendment Section Division of Corporations

NAME OF CORPORATION: O	tto Pauls T	ransport & Ser	vice Inc			
DOCUMENT NUMBER: P140	000091047					
The enclosed Articles of Amendmen						
Please return all correspondence cor	ncerning this matte	r to the following:				
Kevin H	ackett					
		Name of Contact Person	1			
First Co	First Coast Tax & Accounting					
		Firm/ Company				
5576-2	5576-2 Timuquana Rd					
	· · · · · · · · · · · · · · · · · · ·	Address				
Jacksor	ville, FL. 3	2210				
 		City/ State and Zip Code	2			
khackett@f	iretooaettas	v com				
		for future annual report	notification)			
L-man a	adiess. (10 be disec	roi future annuar report	notification)			
For further information concerning t	his matter, please	call:				
6	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Kevin Hackett		_{at (} 904	771-1040			
Name of Contact Per	rson		de & Daytime Telephone Number			
Enclosed is a check for the following	g amount made pa	yable to the Florida Depa	rtment of State:			
	5 Filing Fee & cate 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 Division of Corpo P.O. Box 6327 Tallahassee, FL 33	rations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301			

FILED

Articles of Amendment to Articles of Incorporation of

14 DEC -4 AM 9:54



Otto Pauls Transport Service Inc

(Name of Corporation as currently filed with the Florida Dept. of State)... P14000091047 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A 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 (Florida street address) New Registered Office Address: (City) (Zip Code) 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 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>pith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	V	_	Darlene Mattiace	2459 Cimarrone Blvd
Add				Saint Johns, FL 32259
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
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Remove				
5) Change		_		
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6) Change				
Add				
Remove				
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	(Be specific)
I/A	
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provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption: 11/18/14	_, if other than the				
date this document was signed.					
Effective date if applicable: 11/18/14					
(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)					
The 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_11/18/14					
Signature Itto Paul Mathail Ja					
(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)					
OTTO PAUL MATTIACE JIZ (Typed or printed name of person signing)	_				
(Typed or printed name of person signing)					
PRESIDENT	_				
(Title of person signing)					