

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6380

From:

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Account Number : I20150000063

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Fact 1	***		
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COR AMND/RESTATE/CORRECT OR O/D RESIGN FINE-LINE EXPRESS TRANSPORT SERVICES CORP

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JUN 29 2014

C. CARROTHEM

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporat	ions			
NAME OF CORPORAT	rion: FIVO-	une Express	transport Sorvices Co	orp .
DOCUMENT NUMBER	t:P	4000097881		
The enclosed Articles of A	(mendment and fee are su	bmitted for filing.		
Please return all correspon	ndence concerning this ma	tter to the following:		
	8	unior bello	•	
	· .	Name of Contact Persor		•
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For further information co	ncerning this matter, pleas	se call:	•	•
Hono	or Bollo	305	211000099	
<u> </u>	ontact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	e following amount made	payable to the Florida Depa	rtment of State:	
\$35 Filing Foo	□\$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 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 to Articles of Incorporation of

(Name of Corpo	ration as currently filed wit	h the Florida Dept. of State)
FIN	1 100 4-10100	Transportservices cove.
(De	ocument Number of Corporati	on (if known)
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	orida Statutes, this <i>Florida Pr</i>	rofit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the	<u>e corporation:</u>	Then new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	Corp," "Inc," or "Co". A p.	rofessional corporation name must contain the
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)	able: 4 <u>DDRESS</u>)	Hallah Fr 33010
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	: BOX)	170 W 26 street #1 Hallah fr 33010.
D. If amending the registered agent and/or reg	detared office address in Flo	and and the page of the
new registered agent and/or the new register		THE THE PROPERTY OF THE
Name of New Registered Agent	YUNIOY	Bello
	(Florida street address)	65+41
New Registered Office Address:	Malean	, Florida 33010 (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: nt. I am familiar with and ac	ccept 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:

ΧC	hange	PT	<u>Iohn Doc</u>	•	
X R	emove	Y	Mike Jones		
<u>x</u> A	Add	<u>sv</u>	Sally Smith		
Type (Chec	of Action ck One)	Title	<u>Name</u>		<u>Addres</u> s
·	Change	VP	Sandra	LCUPO	MOW 26 Street
6	\angle \wedge dd				Hallan Fe3301
_	Remove		•		
2) _	Change		<u> </u>		
_	Add	•	· ·		
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3)_	Change				···
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4)	Change				
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	Remove				
5)	Change				
_	Add ·				
	Remove				
б)	Change		<u> </u>		
	A dd				
	Remove				

II amending or adding additional A Attach <i>additional sheets, if necessary,</i>). (Be specific)		
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7		· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an ex provisions for implementing the an	change, reclassification, or ca nendment if not contained in t	ncellation of issued share: he amendment itself:	L .
(if not applicable, indicate N/A)	<u> </u>		
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The date of each amendment(s) adopted date this document was signed.	on:	10/10/10	, if other than the
Effective date if applicable;		6/26/15	
	(no more than 90) days after amendment fit	e date)
Note: If the date inserted in this block a document's effective date on the Departm	does not meet the applicatent of State's records.	able statutory filing require	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The nt for approval.	number of votes cast for t	he amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each			
"The number of votes cast for the	e amendment(s) was/were	sufficient for approval	
by	100		
	(voting group)		•.
The amendment(s) was/were adopted I action was not required.	by the board of directors	without shareholder action	and shareholder
The amendment(s) was/were adopted t action was not required.	by the incorporators with	out shareholder action and	shareholder
Dated	126/15		·
Signature X	rall.		
(By a director	president or other office	er – if directors or officers	have not been
	in incorporator — if in the uclary by that fiduciary)	hands of a receiver, truste	e, or other court
	Yenrio	BOUC	
<u></u>	(Typed or printed n	ame of person signing)	· · · · · · · · · · · · · · · · · · ·
•	Oc.	ordon+	•
	(Title o	f person signing)	