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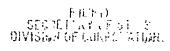
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Pittbull Transports	ntion Inc				
	BER: P15000008889					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Alyssa Kissee					
	Name of Contact Person					
	Capital Associates Inc.					
	Firm/ Company					
	2594 E Barnett Rd Ste C					
	*****	Address				
	Medford, OR 97504					
		City/ State and Zip Cod	le			
pitbu	lltransport379@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
Alyssa Kissee		at (773-377 de & Daytime Telephone Number			
Name	of Contact Person	Area Co	ode & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable 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 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



Pittbull Transportation Inc

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rittotti Transportation inc	
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P15000008889	
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) t
A. If amending name, enter the new name of the co	rporation:
Pit Bull Transportation Inc.	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the d	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicables (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>
D. If amending the registered agent and/or register new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
	(Chy) (Zh) Couc)
New Registered Agent's Signature, if changing Reg	istered Agent:
1 nereoy accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
·	
Sign	ature 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	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				-
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		-		
Add				•
Remove				
6) Change		·····		
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s (Be specific)				
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an amendment provides for an eych	ange reclassificatio		i oi issucu shai	<u>cs.</u>	
provisions for implementing the amer	ange, reclassificatio idment if not contai	ned in the amend	<u>lment itself:</u>		
an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassificatio idment if not contai	ned in the amend	lment itself:		
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provisions for implementing the ame	ange, reclassificatio	ned in the amend	lment itself:		

The date of each amendment(s) a	dention:	, jf _i other, than the
date this document was signed.		nu SES LISKY (Fig. 1)
Effective date <u>if applicable</u> :	9/2015	William fir Culture in a super
Effective date <u>if applicable.</u>	(no more than 90 days after amendment file date)	15 DEC 11 AM 9: 02
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amen ufficient for approval.	dment(s)
	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendment	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and sha	areholder
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareho	lder
12/9/2015 Dated	•	
Signature		
select	director, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or other officers by that fiduciary)	ot been ner court
	Alyssa Kissee	
	(Typed or printed name of person signing)	
	Receiver/Agent Authorized person (Title of person signing)	n