## P15000009025

| (Re                     | equestor's Name)   | · · · · · · · · · · · · · · · · · · · |  |  |
|-------------------------|--------------------|---------------------------------------|--|--|
| (Ac                     | ldress)            |                                       |  |  |
| (Ac                     | ddress)            |                                       |  |  |
| (Ci                     | ty/State/Zip/Phone | ⇒ #)                                  |  |  |
| PICK-UP                 | WAIT               | MAIL                                  |  |  |
| (Ві                     | usiness Entity Nan | ne)                                   |  |  |
| (Document Number)       |                    |                                       |  |  |
| Certified Copies        | _ Certificates     | s of Status                           |  |  |
| Special Instructions to | Filing Officer:    | ,                                     |  |  |
|                         |                    |                                       |  |  |
|                         |                    |                                       |  |  |
|                         |                    |                                       |  |  |
|                         |                    |                                       |  |  |

Office Use Only



000271086380

04/13/15--01005--008 \*\*35.00

2015 APR 23 AM 9: 39

APR 2 4 2014

C. CARROTHERS



April 14, 2015

CARLOS M GALLINAL 3708 11TH STREET SW LEHIGH ACRES, FL 33976

SUBJECT: BMSA TRANSPORTATION INC.

Ref. Number: P15000009025

We have received your document for BMSA TRANSPORTATION INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

THE FORM YOU SUBMITTED IS FOR A NON PROFIT CORPORATION.

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.

Cathy A Carrothers Regulatory Specialist

Letter Number: 815A00007367

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: BMSA Transportation, Inc. |  |  |   |  |
|--|--|--|---|--|
| DOCUMENT NUMI                                  | BER: P1500000902   | 5  |   |  |
|  | of Amendment and fee are su  |  |   |  |
| Please return all corre                        | spondence concerning this ma   | tter to the following:   |   |  |
|  | Carlos M Gallinal  |  |   |  |
|  |  | Name of Contact Person   | n   |  |
|  |  | Firm/ Company  |   |  |
|  | 3708 11th Street   | SW   |   |  |
|  | Lehigh Acres, FL   | Address <b>33976</b>   |   |  |
|  |  | City/ State and Zip Cod  | e   |  |
| car  | losmgallinal@yah   |  |   |  |
|  | E-mail address: (to be us  | sed for future annual report                                       | notification)   |  |
| For further informatio                         | n concerning this matter, pleas  | se call:   |   |  |
| Carlos M. Gallinal                             |  | at ( 786   | 379-6658x   |  |
| Name   | of Contact Person  | Area Co  | de & Daytime Telephone Number   |  |
| Enclosed is a check fo                         | r 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)    |  |
| Ame<br>Divi<br>P.O.                            | ling Address<br>endment Section<br>sion of Corporations<br>Box 6327<br>ahassee, FL 32314 | Ameno<br>Divisio<br>Clifton<br>2661 E                              | Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301 |  |

## Articles of Amendment to Articles of Incorporation of

BMSA Transportation, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P15000009025 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amends its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) 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:<br>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) | <u>Title</u> | Name         | <u>Addres</u> s     |
| 1) Change                  | V,T          | Brian Cooper | 2609 40th Street SW |
| Add                        |              |              | Lehigh Acres, FL    |
| Remove                     |              |              | 33976               |
| 2) Change                  | P,S          | Ann M. Moody | 2609 40th Street SW |
| Add                        | - 1          |              | Lehigh Acres, FL    |
| Remove                     |              |              | 33976               |
| 3) Change                  |              |              |                     |
| Add                        |              |              |                     |
| Remove                     |              |              |                     |
| 4) Change                  |              |              | _                   |
| Add                        |              |              |                     |
| Remove                     |              |              |                     |
| 5) Change                  |              |              |                     |
| Add                        |              |              |                     |
| Remove                     |              |              |                     |
| 6) Change                  |              |              |                     |
| Add                        |              |              |                     |
| Remove                     |              |              |                     |

| Attach additional sheets, if necessary). (  | (De specific)  |              |
|---|--|--------------|
|   |  | _            |
|   |  |              |
|   |  |              |
|   |  | <del>_</del> |
|   |  |              |
|   |  | _            |
|   |  |              |
|   |  |              |
|   |  |              |
|   |  |              |
|   |  |              |
|   |  |              |
|   |  | <del></del>  |
|   |  | _            |
|   |  |              |
|   |  |              |
|   |  | <del></del>  |
|   |  |              |
|   | ···  | <del></del>  |
|   |  | _            |
|   |  |              |
|   |  |              |
|   |  |              |
| If an amendment provides for an exchan  | nge, reclassification, or cancellation of issued shares, |              |
| <u>provisions for implementing the amend</u><br>(if not applicable, indicate N/A) | lment if not contained in the amendment itself:          |              |
| ,   |  |              |
| V/A   |  |              |
|   |  |              |
|   |  |              |
|   |  | <del></del>  |
|   |  |              |
|   |  |              |
|   |  | _            |
|   |  | _            |
|   |  |              |
|   |  |              |
|   |  |              |

| The date of each amendment(s) adoption: 4-3-2015        |  | , if other than the |
|---|--|---------------------|
| date this document was signed.                          |  |                     |
| Effective date if applicable: 4                         | -3-2015  |                     |
|   | (no more than 90 days after amendment file date)   |                     |
| Adoption of Amendment(s)                                | ( <u>CHECK ONE</u> )   |                     |
| The amendment(s) was/were aby the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.  |                     |
|   | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): |                     |
|   | ast for the amendment(s) was/were sufficient for approval  |                     |
| by  | (voting group)   |                     |
|   | (voting group)   |                     |
| The amendment(s) was/were a action was not required.    | adopted by the board of directors without shareholder action and shareholder   |                     |
| The amendment(s) was/were action was not required.      | adopted by the incorporators without shareholder action and shareholder  |                     |
| Dated 4-20-2  | 2015   |                     |
| Signature   | buan C Coops D.  |                     |
| · · · · · · · · · · · · · · · · · · ·                   | a director, president or other officer - if directors or officers have not been  |                     |
|   | cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)                              |                     |
|   | Brian Cooper   |                     |
|   | (Typed or printed name of person signing)  | <del></del>         |
|   | Incorporator   |                     |
|   | (Title of person signing)  |                     |