Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : THE ELITE CARRIER SERVICES OF MIAMI LLC

Account Number: I20120000040

Phone

; (305)405-2600

Fax Number

: (305)405-2601

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN T T TRANSPORT & TOWING CORP

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporations

E OF CORPORATION: TT TRANSPORT & TOWING CORP	
UMENT NUMBER: P15000011903	
nclosed Articles of Amandment and fee are submitted for filing.	
e return all correspondence concerning this matter to the following:	
MANUEL A VALENCIA	
Name of Contact Person	
Firm/ Company	
1334 SW 6 ST APT 2	
MIAMI,FL 33135	
City/ State and Zip Code	
SRUBIO@ELITECSOM.COM B-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

MANUEL A VALENCIA

,,305 ,834-

Name of Contact Person

Area Code & Daytime Telephone Number

Euclosed is a check for the following amount made payable to the Florida Department 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

15 M 22 PH 2: 49

Articles of Amendment Articles of Incorporation

TT TRANSPORT & TOWING CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000011903

(Document	Number of Corporation	(if known)			
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, th	is Florida Profit Corporation adopts the foll	owing am	endmer	e)tc
A. If amending name, enter the new name	e of the corporation;				
			The	new	
	ton "Corp," "Inc," or	ion," "company," or "incorporated" or t "Co". A professional corporation name n "P.A."			
B. Enter new principal office address, if	8811 NW 16 AVE				
(Principal office address MUST BE A ST)	MIAMI,FL 33147				
C. Francisco de la constitución	M.				
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		12060 NW S RIVER DR	:===f	15 A	
		MEDLEY,FL 33178		APR 2	717
				23	1
D. If			====	<u>규</u>	C
D. If amending the registered agent and/ new registered agent and/or the new r				\ddot{i}	
Name of New Registered Agent LUIS PASCUAL BARRIOS					
	8811 NW 16	,. •			
-	(Florida s	treet 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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$y</u>	Saily Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	LUIS PASCUAL	8811 NW 16 AVE
Add			MIAMI,FL 33147
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<u>- ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pernove			

(Ausen i	iding or adding additional sheet	's, if necessary).	(Be spec	fic)	_		
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provisi	nendment provi 1983 for implem 1991 not applicable, 1	enting the amo	hange, recla endment if n	srification, or of contained	canceliation o	f issued shares ent itself;	•
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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_04/22/2015	
Signature it Manuel	
(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)	•
MANUEL A VALENCIA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	