## P15000022741

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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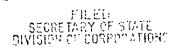
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	POCHOLO BER: P1500002274	TRANSPORT I	NC
	of Amendment and fee are su		
Please return all corres	pondence concerning this mat	ter to the following:	
	ALBERTO GONZ	'ALEZ	
	PRESIDENT	Name of Contact Person	1
	20300 LANI LN	Firm/ Company	
	NORTH FORT M	Address YERS, FL 3391 City/ State and Zip Code	
INF	E-mail address: (to be us	UTIONSERVICE ed for future annual report	
For further information	n concerning this matter, pleas	e call:	
ALBERTO G	ONZALEZ	<sub>at (</sub> 786	779-5732
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	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 Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



16 MAY 11 AM 10: 51

(Name of Corporation as currently filed with t	the Florida Dept. of State)
P15000022741	
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>a:</u>
	The new
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviat	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ion "P.A."
B. Enter new principal office address, if applicable:	20300 LANI LN
(Principal office address MUST BE A STREET ADDRESS)	NORTH FORT MYERS,FL 33917
C. Enter new mailing address, if applicable:	20300 LANI LN
(Mailing address MAY BE A POST OFFICE BOX)	NORTH FORT MYERS,FL 33917
If amending the registered agent and/or registered office     new registered agent and/or the new registered office add	address in Florida, enter the name of the
KATHEDINE	
Name of New Registered Agent 20300 LANI I	N
	ia street address)
New Registered Office Address: NORTH FOR	T MYERS,FL , Florida 33917
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent's	gent:
hereby accept the appointment as registered agent. I am famil	liar with and accept the obligations of the position.
,	red 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:	DT.	John Dog				
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>	<u>Name</u>	<u>Addres</u> s			
1) Change	Р	ALBERTO GONZALEZ	20300 LANI LN			
Add			NORT FORT MYERS			
Remove			FL 33917			
2) Change	Р	KATHERINE DIAZ	20300 LANI LN			
Add			NORT FORT MYERS			
Remove			FL 33917			
3) Change	V	ALEJANDRO SANTANA	20300 LANI LN			
Add			NORT FORT MYERS			
Remove			FL 33917			
4) Change	s	HAYDEE MARTIN	20300 LANI LN			
<b>✓</b> Add			NORT FORT MYERS			
Remove			FL 33917			
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

	wannonai sneets, ij necess	ary). (Be specif	change(s) here:		
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lf an an	nendment provides for a	n exchange, recla	ssification, or ca	ncellation of issued s	<u>1ares,</u>
provisi	nendment provides for a lons for implementing the not applicable, indicate N	e amendment if n	ssification, or car ot contained in t	ncellation of issued s he amendment itself:	nares,
provisi	ons for implementing the	e amendment if n	ssification, or car ot contained in t	ncellation of issued s he amendment itself:	1ares,
provisi	ons for implementing the	e amendment if n	ssification, or can ot contained in t	ncellation of issued s he amendment itself:	nares,
provisi	ons for implementing the	e amendment if n	ssification, or can ot contained in the	ncellation of issued s he amendment itself:	nares,
provisi	ons for implementing the	e amendment if n	ssification, or can	ncellation of issued s he amendment itself:	nares,
provisi	ons for implementing the	e amendment if n	ssification, or can ot contained in t	ncellation of issued s he amendment itself:	lares,
provisi	ons for implementing the	e amendment if n	ssification, or car ot contained in t	ncellation of issued s he amendment itself:	lares,
provisi	ons for implementing the	e amendment if n	ssification, or can	ncellation of issued s	lares,

FILE()
SECRETARY OF STATE
DIVISION OF CORPORATIONS
\_\_\_\_\_, if other than the

The date of each amendment	(c) ada_dia 05/10/2016	อเพียงอัน ก็ก็ดั		, if other than the
date this document was signed		16 MAY 1 I	AM 10: 51	n outer than the
Effective date if applicable:	05/10/2016			
	(no more than 90 days	after amendment file date)	•	
Adoption of Amendment(s)	(CHECK ONE)			
	re adopted by the shareholders. The number ere sufficient for approval.	er of votes cast for the amend	ment(s)	
The amendment(s) was/we must be separately provide	re approved by the shareholders through ved for each voting group entitled to vote so	oting groups. The following separately on the amendment(s	tatement ):	
"The number of votes	s cast for the amendment(s) was/were suff	cient for approval		
by	(voting group)	.,,		
action was not required.	re adopted by the board of directors without see adopted by the incorporators without see			
Dated_05/	10/2016			
S	By/a director, president or other officer – i elected, by an incorporator – if in the hand ppointed fiduciary by that fiduciary)			
	KATHERINE DIAZ			
	(Typed or printed	name of person signing)		
	PRESIDENT			
	(Title of	person signing)		