## P15000000539

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
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(Do	cument Number)	
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BIVISION OF CERTPRATION

Amend

AUG 20 2015 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ION:	Big Family Talansput Inc PIS0000 62539			
DOCUMENT NUMBER	<b>:</b>	P150000 62539			
The enclosed Articles of A	mendment and fee are sub	bmitted for filing.			
Please return all correspond	Please return all correspondence concerning this matter to the following:				
		FRANKLIN B. RIVAS			
• • • • • • • • • • • • • • • • • • • •		Name of Contact Person			
	Bu	Name of Contact Person  Frankly Thansport Mc  Firm/Company			
		Firm/ Company			
	2	Plant Company  206 W Baken ST  Address  Plant Cts FC 33567  City/ State and Zip Code			
Address					
	V	Plant City FL 33563			
		City/ State and Zip Code			
<del></del>	E mail address (to be un	ed for future annual report notification)			
	E-man address. (to be us	ed for future armual report normeation)			
For further information cor	ncerning this matter inleas	e call·			
Tot further information con	icerning this matter, pieas	c curi.			
-	Franklin B	Rivas <sub>at</sub> 813 752-6200  Area Code & Daytime Telephone Number			
Name of Co	ontact Person	Area Code & Daytime Telephone Number			
Enclosed 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 & □\$52.50 Filing Fee Certified Copy Certificate of Status			
		(Additional copy is Certified Copy			
		enclosed) (Additional Copy is enclosed)			
Mailino	Address	Street Address			
Amendn	nent Section	Amendment Section			
	of Corporations	Division of Corporations			
P.O. Box	x 6327 see, FL 32314	Clifton Building 2661 Executive Center Circle			
i arranas	υνος 1 E 1 2 E J 1 T	Tallahassee, FL 32301			

## **Articles of Amendment**

to

Articles of Incorporation

of	
Big Fr	Mily Transport no
(Name of Corporation as currently	filed with the Florida Dept. of State)
P	150000 62539
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
word "chartered," "professional association," or the abbreviation "land 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)	ECCEPTEDATE AND IS AND
D. If amending the registered agent and/or registered office addr	

new registered agent and/or the new registered office address:

Name of New Registered Agent

FRANKIIN B. RIVAS

3206 W Baken ST

(Florida street address)

Plant City, Florida 33563

(City) (Zip Code) New Registered Office Address:

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: 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	<u>P</u>	FRANKlin B. Rivas	3206W Balon Si Plant City, Fl
Add			
Remove			33563
2) Change	<del></del>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.	NgUST 5, 2015	, if other than the
Effective date if applicable:	ore than 90 days after amendment file date)	
(no me	ore than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet document's effective date on the Department of State's r		will not be listed as the
Adoption of Amendment(s) (CHECK O	<u>NE</u> )	
The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval		
☐ The amendment(s) was/were approved by the sharehomust be separately provided for each voting group e		1
"The number of votes cast for the amendment(s	s) was/were sufficient for approval	
by(voting grow	<i>ιρ)</i>	
☐ The amendment(s) was/were adopted by the board of action was not required.	directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the incorpor action was not required.	rators without shareholder action and shareholder	
Dated Augusi	-5,2015	
	other officer – if directors or officers have not been r – if in the hands of a receiver, trustee, or other court fiduciary)	
	FRANKLIN B. RIVAS	ı
(Typed o	or printed name of person signing)	<del> </del>
	President	
<del></del>	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·