## P15000066091

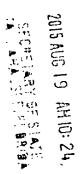
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C. CARROTHERS

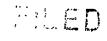
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ION: DIEHARD TRAN	SPORT INC		· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER:	P15000066091			
The enclosed Articles of Air		bmitted for file	ing.	
Please return all correspond	dence concerning this ma	tter to the follo	owing:	
DER	RICK WILLIAMS			
		Name of C	ontact Person	n
DIE	HARD TRANSPORT IN	IC		
		Firm/ (	Company	
POB	OX 223552			
		Ad	dress	
WES	ST PALM BEACH FL, 3	3422		
		City/ State	and Zip Cod	e
DERRICK	WILLIAMS@CONSUL	TANT.COM		
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further information con	cerning this matter, pleas	se call:		
DERRICK WILLIAMS		at (	561	)
Name of Co	ntact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the l	Florida Depa	ertment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Fill Certified (Additional enclosed)	Copy I copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division o P.O. Box	ent Section of Corporations		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



2015 AUG 19 AH 10: 24

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## DIEHARD TRANSPORT INC

( <u>Name</u>	of Corporation as current	y med with the Florida Dept. of State)
P15000066091		
	(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc." or "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address,		5117 FAIRWOOD AVE
(Principal office address <u>MUST BE A S</u>		CLEARWATER, FL 33759
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
D. If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent	LEE EDWARD MOORE	
itame of their Registerea rigens	337 BAKER DR	
	(Florida str	eet address)
New Registered Office Address:	WPB	, Florida 33409
nen neganerea ogree naarees.		(City) (Zip Code)
New Registered Agent's Signature, if c		vith and accept the obligations of the position.
L.e.	Marie	>
	Signature of New R	egistered 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	PT	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	TR		LEE EDWARD MOORE	337 BAKER DR
X Add				WPB, FL 33409
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		<u> </u>		
Add				
Remove				
5) Change				
		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

ach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amen	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	8/13/2015	
	adoption:	, if other than the
date this document was signed.		
8 Ceferativa data if amplicables	/13/2015	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	<del>-</del>
Note: If the date inserted in the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	at(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehol	der
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
8/13/20	5	
DatedSignature	Derrich William	
	a director, president or other officer - if directors or officers have not bee	n
	cted, by an incorporator - if in the hands of a receiver, trustee, or other co	urt
арро	pinted fiduciary by that fiduciary)	
	DERRICK WILLIAMS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>