P15000082757

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C LEWIS

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Remier	e auto Transporters Corp.
DOCUMENT NUMBER: Y15	000082757.
The enclosed Articles of Amendment and fee are subm	tted for filing.
Please return all correspondence concerning this matter	to the following:
\{	ena aosta.
Mas Godit	Name of Contact Person Services Tree
7951 SW 4	Firm/ Company to ST Ste 204
- Nami F	Address 33\55
1.1.	City/ State and Zip Code
E-mail address: (in be used	for future annual report notification)
For further information concerning this matter, please of long was a long with the long was a long was a long with the long was a long with the long was a long was a long with the long was a long was a long with the long was a	at (<u>305</u>) <u>226 - 2555</u> . Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pay:	•
<u> </u>	S43.75 Filing Fee & □\$52.50 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

Articles of Amendment

to

Articles o	of Incor	poration
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(Name of Corporation as current ith the Florida Dept. of State)

1130000	カレインブ
(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
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	15126 SW 815T UniTiOI Mami Fl 33193
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15126 SW 81 ST UniT101 Mann Fl 33193
D. If amending the registered agent and/or registered office address Name of New Registered Agent 15126 SU (Florida street)	Griselda Garcia 2815T UniTIOI
New Registered Office Address:	, Florida 33 193. (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiary	

ure 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 <math>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 X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add		<u>. </u>	
Remove 3)Change			
Add			
4) Change			
Remove			
5) Change Add			
Remove			·
6) Change Add			
Remove			

E. <u>If amending</u> (Attach <i>aḍdit</i>	or addin	g additions	al Articles,	enter chang	<u>(e(s) here</u> :					۸۵
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F. If an amend provisions f	<u>for imple</u> i	menting th	<u>e amendme</u>	reclassifica nt if not coi	ition, or can itained in th	icellation of re amendm	<u>i issued s</u> ent itself	<u>:</u>		
(if not a	applicable	. indicate N	//A)					-		
										
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, The date of each amendment(s) adoption date this document was signed.	on:	11/03	15	ु	if other than the
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Effective date <u>if applicable</u> :	luo more t	han 90 lave after	r amandman	t filo data 15 NO	V9 AM 9:55
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Note: If the date inserted in this block document's effective date on the Departn			tory filing re	quirements, this d	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were adopted by the shareholders was/were sufficie		s. The number o	of votes cast for	or the amendment	(s)
☐ The amendment(s) was/were approved must be separately provided for each					nent
"The number of votes cast for th	ie amendinent(s) wa	ns/were sufficier	nt for approva	1	
by				 _•	
	(voting group)				
☐ The amendment(s) was/were adopted action was not required.	by the board of dire	ectors without sh	nareholder ac	tion and sharehold	ler
☐ The amendment(s) was/were adopted	by the incorporator	s without shareh	iolder action :	and shareholder	
action was not required.	[] -	. ·			
Dated	11/03/19	201			
Signature	X-11110) ĭ		
	or, president of other	r officer – if dir	ectors or offic	ers have not been	
	an incorporator - if		a receiver, tr	ustee, or other cou	ırt
appointed he	duciary by that fidu	ciary)	t 6	۸	
	Plan	ia Gri	zelda	Carcia	
	(Typed or pri	inted name of po	erson signing)		;
		Diesele	Ta		
	(Title of person s	signing)		· · · · · · · · · · · · · · · · · · ·