

P15 000087424

Florida Department of State
Division of Corporations
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COR AMND/RESTATE/CORRECT OR O/D RESIGN
SAFE SERVICE TRANSPORT INC

Certificate of Status	0
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Page Count	04
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DEC 05 2017

G. YOUNG

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Help



November 1, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SAFE SERVICE TRANSPORT INC
4390 SW 164TH CT
MIAMI, FL 33185

SUBJECT: SAFE SERVICE TRANSPORT INC
REF: P15000087424

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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Shelia H Young
Regulatory Specialist II

FAX Aud. #: H17000287116
Letter Number: 217A00022031

RECEIVED
17 REC-4 PH 3:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
1111 GUY WOOD BLVD
TALLAHASSEE, FL 32310

Articles of Amendment
to
Articles of Incorporation
of
SAFE SERVICE TRANSPORT INC

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

P1500087424

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

950 SW 148TH PLACE

MIAMI, FL 33194

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

950 SW 148TH PLACE

MIAMI, FL 33194

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

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

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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:

Change PT John Doe
 Remove V Mike Jones
 Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>PD</u>	<u>GUTLLERMO GARCIA</u>	<u>4390 SW 164TH COURT</u>
<input type="checkbox"/> Add			<u>MIAMI, FL 33185</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>PD</u>	<u>CARLOS J. JARQUIN</u>	<u>950 SW 148TH PLACE</u>
<input checked="" type="checkbox"/> Add			<u>MIAMI, FL 33194</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The date of each amendment(s) adoption: November 1, 2017 if other than the date this document was signed.

Effective date (if applicable): _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 November 1, 2017

Signature _____

(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)

MAIBER JARQUIN

(Typed or printed name of person signing)

STD

(Title of person signing)