P14000003570

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2018 MAY 21 PM 4: 35
SECRETARY OF STATE

C. GOLDEN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: USHIP AUTO TR	ANSPORT INC			
DOCUMENT NUMBE	P16000003570				
The enclosed Articles of	**Amendment and fee are su	ibmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
0	smani R Garces				
_		Name of Contact Person)		
υ	SHIP AUTO TRANSPOR	T INC			
_		Firm/ Company			
19	9741 SW 103rd CT				
	Address				
C	utler Bay, FL 33157				
		City/ State and Zip Code	e		
ushipau	totransport@gmail.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information of	concerning this matter, plea	se call:			
Osmani R Garces		at (274-2978		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for t	he following amount made	payable to the Florida Depa	ortment of State:		
S35 Filing Fee	□S43.75 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)		
Mailing Address			Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

2018 HAY 21 PH 4: 35

USHIP AUTO TRANSPORT INC

/Name of Cornoratio	n as currently filed with the Florida Dept. of SECRETARY OF STATE
P16000003570	TATEAHASSEE.FLORIDA
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Floridaits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:
	The new large of the company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDI</u>	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u></u>
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I	(Zip Code) stered Agent: am familiar with and accept the obligations of the position.
Signa	ture 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	V	Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	P	Lucila Concepcion Carrillo	8740 SW 21 Ter		
X Add			Miami, FL 33165		
Remove					
2) Change			<u> </u>		
Add					
Remove					
3) Change					
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
<u>.</u>	
	
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	<u> </u>
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
Cy upp is and a mile in 1921)	
	
Cy mospeciality mileate (1921)	
vy mospy manage man	
vy modernity miceae many	

The date of each amendment(s) adoption:	, 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 of document's effective date on the Department of State's records.	late will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following staten must be separately provided for each voting group entitled to vote separately on the amendment(s):	<i>ient</i>
"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 sharehold action was not required.	ler
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
05/07/2018	
Dated	
Simone	
Signature (By a director, president or other officer – if directors or officers have not been	 1
selected, by an incorporator of in the hands of a receiver, trustee, or other con	
appointed fiduciary by that fiduciary)	
Osmani R Garces	
(Typed or printed name of person signing)	
President	
(Title of person signing)	