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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corpora	ations		
NAME OF CORPORA DOCUMENT NUMBE	7)11 00	10015060	compaped Servicus Inc
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	Antoine 1836 Cryst Lakek	Name of Contact Person N-A Firm/ Company Address City/ State and Zip Code	rive # 64 da 33801
	E-mail address: (to be us	ed for future annual report	notification)
Antonet	oncerning this matter, pleas	is at 321	de & Daytime Telephone Number
Enclosed is a check for the	ne following amount made p	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 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)
<u>Mailin</u>	g Address	Street	<u>Address</u>

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of	17 JUN 2 D AH 10: 09
Destination Transport	Service Son Inc
(Name of Corporation as current)	ly filed with the Florida Dept. of State).
1 1600015060	66
(Document Number o	f 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
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1836 N. Cystal Lake Dr #
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Some as above
D. If amending the registered agent and/or registered office add	
Name of New Registered Agent — Potoloeth	e. V Downs
1836 N.C	4Stal Lake Drue #64
New Registered Office Address:), Florida 33801 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>:</u> 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 Do	<u>oe</u>			
X Remove	<u>v</u>	Mike Jo	nes			
X Add	<u>sv</u>	Sally Sn	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
1) Change	2		Antoinel	te Y. Davis	1836 N Crystal	Lakel
X Add					#64	1
Remove					Lakelond, Fl. 33	301
2) Change	<u>P</u>	_ 4	Bridgette 1	Upeland-Coul	of 1114 take Ariona	
Add					Automobile, fi.	3385,3
Remove 3) Change	<u>VP</u>) 	Rubert	Could	1114 Lake Prima	Bud
Add				•	Aubumdate, 47 3	3823
Remove						
4) Change						
Add						
Remove						
5) Change					-	
Add						
Remove						
6) Change						
Add						
Remove						

	(Be specific)			
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an amendment provides for an exch	ange, reclassification	, or cancellation o	f issued shares,	
an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification	o, or cancellation o	f issued shares, ent itself:	
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The date of each amendment(s) adoption:late this document was signed.	, if other than the
T - Cts 2010	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more man >0 days after amenament five date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date widocument's effective date on the Department of State's records.	ill 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(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) 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	
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)	Aled
Bridgetk, Copeland-Goold / Robert (Typed or printed name of person signing)	Gould
President and Vice President (Title of person signing)	