# P160000 27969

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#### **COVER LETTER**

**TO:** Amendment Section **Division of Corporations** 

	ration: <u>Silver</u> Ber: P160000	_	port, Inc.			
	· · · · · · · · · · · · · · · · · · ·		<del></del>			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	Silver	ry V. Adam Name of Contact Person  ine Transp  Firm/ Company  ilhopper R	port, Inc.			
		Mudiess				
	Gaines	City/ State and Zip Cod	2653			
Silverline 216 equail. Com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:						
Larry V	· Adams of Contact Person	at ( <u>352</u>	328.1144			
Nāme c	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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 Tellahoreaa El 2021 (

Street Address
Amendment Section

Division of Corporations The Centre of Tallahassee 2415 M. Manroa Street, Suita 910

### Articles of Amendment Articles of Incorporation

## Silver Line Transport, Inc (Name of Corporation as currently filed with the Florida Dept. of State)

P1600	00021969
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendmen
A. If amending name, onler the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P	". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	202
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
•	\$ 23 \$ 23 \$ 23
	्रा <u> </u>
C. Enter new mailing address, if applicable:	and the second of the second
(Mailing addysss MAY BE A POST OFFICE BOX)	
	ST COM COM
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add  Name of New Registered Agent	address in Florida, enter the name of the dress:
(Florid	da street address)
New Registered Office Address:	, Florida
new negasierea Office nauress.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famili	gent: liar with and accept the obligations of the position.
Signature of Vi-	ew Registered Agent, if changing
signature of we	ew regimerea Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	Philip R.Adams	6903 Millhopper Rd Gainesville, FL 32653
Remove 2) Change			
Remove 3) Change		<del></del>	<b>2020</b>
Add Remove			2020 MAR 23 A
Add			PERSONAL SERVICES
5)Change		<del></del>	
Remove			
6) Add			
Remove			

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	
(no more than 90 days after amenament fite date	e)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without share action was not required.	holder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the arby the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	2020 5.5.2.0 5.5.2.0
by	HAR 2
Dated March 18, 2020 Signature Lange V. adams	R 23 M 2: TARY OF STA
Signature Source V. Castana (By a director president or other officer – if directors or officers have	<u> </u>
selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	other court
Larry V. Adams (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	