# P16000029131

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SECRETARY OF STATE
DIVISION OF CORPORATION

MAY 31 2016

C LEWIS

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PAGES AUTO TE	RANSPORT INC					
DOCUMENT NUMB	P16000029131						
The enclosed Articles	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:					
		ALBA E VIVAR					
•	Name of Contact Person						
	MIAMI DISPATCH & CARRIER SERVICES						
-	Firm/ Company						
8040 NW 95TH ST STE 106							
-	Address						
	1	HIALEAH, FL 33016					
•	City/ State and Zip Code						
•	E-mail address: (to be us	sed for future annual report	notification)				
For further information	concerning this matter, pleas	se call:					
ALBA E VIVAR		at ( <u>305</u>	822-0255				
			de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	navable to the Florida Dena	artment of State				
2110.0004 10 4 0110011 101		pa, 2010 to the 1 101122 5 opt					
■ \$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)				
Ame Divi: P.O.	ing Address  ndment Section sion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle				

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATION

2016 MAY 26 PM 9: 25

#### PAGES AUTO TRANSPORT INC

## (Name of Corporation as currently filed with the Florida Dept. of State) P16000029131 (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: 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." 691 SE 3 PL B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) HIALEAH, FL 33010 C. Enter new mailing address, if applicable: 691 SE 3 PL (Mailing address MAY BE A POST OFFICE BOX) HIALEAH, FL 33010 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: **LUIS PAGES** Name of New Registered Agent 691 SE 3 PL (Florida street address) Florida 33010 HIALEAH New Registered Office Address: (City) 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

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.

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) X Change	P	PAGES, LUIS	691 SE 3 PL
Add			HIALEAH, FL 33010
Remove			
2) Change			
Add			
Remove			
3 ) Change			***************************************
Add			
Remove			
4) Change			
Add			
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5) Change			
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6) Change			
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n amendment provides for an exchar	ge, reclassification,	or cancellation	of issued share:	<u>S4</u>	
ovisions for implementing the amend (if not applicable, indicate N/A)	ment if not containe	d in the amend	ment itself:		
(у погаррисате, такие гол)					
·					

	05/23/2016		•	
The date of each amendment(s) add date this document was signed.			SECKETARY I DIVISION OF CO	if other than the
05/23	/2016		DIAIZION OF CO.	
Effective date <u>if applicable</u> :	(no more than 90 days afte	r amendment file date)	2016 HAY 26	<del>рн 9</del> : 25
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statut artment of State's records.	ory filing requirements	, this date will not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of ficient for approval.	votes cast for the amer	ndment(s)	
	oved by the shareholders through voting ach voting group entitled to vote separa			
"The number of votes cast for	or the amendment(s) was/were sufficient	for approval		
by	(voting group)	••		
	(voting group)			
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without sh	areholder action and sh	areholder	
☐ The amendment(s) was/were adoption was not required.	ted by the incorporators without shareho	older action and shareh	older	
. 05/23/2016				
Dated	<del></del>			
Signature(By a dir	ector, president or other officer – if dire	ectors or officers have n	ot heen	
	by an incorporator – if in the hands of			
	d fiduciary by that fiduciary)	, ,		
	LUIS PA	GES		
_	(Typed or printed name of pe	rson signing)		
	PRESIDEN	ŀΤ		
_	(Title of person s	igning)		