7/13/2018

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000168545 3)))



H180001685453ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : PROMINENT SERVICES INC

Account Number : 120150000063 Phone : (305)889-2880 Fax Number : (305)889-2881

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

COR AMND/RESTATE/CORRECT OR O/D RESIGN ZOHAR TRANSPORT INC

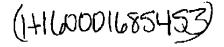
Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

JUL 1 A 2016 CMCWAIR



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: ZOHAR TRANS	PORT INC				
DOCUMENT NUME						
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.				
Please return all corres	pondence concerning this ma	atter to the following:				
	ALFREDO POZO					
•		Name of Contact Person	n			
ZOHAR TRANSPORT INC						
Firm/ Company						
	7995 WEST 30 STREET AI					
-		Address				
:	HIALEAH, FL 33018					
-		City/ State and Zip Cod	c			
UNDE	RWRITERS@PSICOMPAI	NIES,COM	,			
<u> </u>	E-mail address: (to be u	sed for future annual report	notification)			
··· · · · · · · · · · · · · · · · · ·		4 . 50				
For further information	concerning this matter, plea	se call:	•			
ALFREDO POZO		at (901-9395			
	f Contact Person	at () de & Daytime Telephone Number			
TABILE O.	Collinoi i Ciaon	'	do de Dayanto Polopiono Puntoci			
Enclosed is a check for	the following amount made	payable to the Florida Depa	riment of State:			
■ \$35 Filing Fcc	☐\$43.75 Filing Fcc & 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

(H160001685453)

of

7	OH	ΔΙ	TR	AN	ISP(ΠR	т	INC	
	\mathbf{v}_{11}			. 711	ייטו	-		1140	

as currently filed with the Florida Dent. of State
t Number of Corporation (if known)
tatutes, this Florida Profit Corporation adopts the following amendment(s)
oration:
The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
<u> </u>
office address in Florida, enter the name of the
ce address:
· · · · · · · · · · · · · · · · · · ·
(Florida street address)
, Florida
, rigital

Page 1 of 4

(H160001685453)

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 afficer/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, Sully 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	PT	John Doe					
X Remove	Y	Mike Jones					
X Add	<u>sv</u>	Sally Smith					
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s				
l)Change	P	ALFREDO POZO	11119 W OKEECHOBEE ROAD				
X Add			UNIT 203				
Remove			HIALEAH GARDENS, FL 33018				
2) Change	P	OSCAR GOMEZ	11119 W OKBECHOBEE ROAD				
Add			UNIT 203				
X Remove			HIALEAH GARDENS, FL 33018				
3) Change			 				
Add		•					
Remove							
4) Change			·				
Add		·					
Remove							
5) Change		<u> </u>					
Add							
Remove							
6) Change							
· Add			· 				
Remove							

(1+160001685453)

	(+11)	0001(85	453)			
. If amending or adding addition	<u>nal Articles, enter i</u>	change(s) here:	• /	•		
(Attach additional sheets, if nece	xsary). (Be specij	(ic)				
			·			
· · · · · · · · · · · · · · · · · · ·						
<u>-</u>						
						_
		· · · · · · · · · · · · · · · · · · ·			 .	
			,			
		· · · · · · · · · · · · · · · · · · ·				
					•	
	*·.					
					-	
If an anwindment provides for a provisions for implementing the (if not applicable, indicate in the control of	<u>he amendment if ne</u>	ssification, or can ot contained in th	cellation of issue	d shares, elf:		
	•		,		•	
	•			·····		
	•					
· · · · · · · · · · · · · · · · · · ·		,,,,,,,	_ · <u> · · · · · · · · · · · · · · · · · ·</u>			
						·
			•			
· · · · · · · · · · · · · · · · · · ·	,				<u> </u>	
	,					

(H140001685453)

The date of each amendment(s) (date this document was signed.	adoption:, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach witing group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	
selecti	firector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court eted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Page 4 of 4

(H160001685453)