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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VELO CARRIER CORPORATION DOCUMENT NUMBER: P16000034686 The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
HUMBERTO GONZALEZ	
Name of Contact	Person
RAPID INCOME TAX CORP	
Firm/ Compa	
11300 NW 87 CT STE 150	ny
Address	
HIALEAH GARDENS, FL 33018	
City/ State and Zip) Code
RAPIDINCOMETANES@GMAIL.COM	
E-mail address: (to be used for future annual r	report politication)
For further information concerning this matter, please call:	
HUMBERTO GONZALEZ 305) 822-6643 ea Code & Daytime Telephone Number
Name of Contact Person Are	ea Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida	Department of State:
■ \$35 Filing Fee	Certificate of Status
Amendment Section A Division of Corporations D P.O. Box 6327	treet Address mendment Section ivision of Corporations he Centre of Tallahassee 415 N. Monroe Street, Suite 810

Tallahassee, F1, 32303

Articles of Amendment to Articles of Incorporation of

VELO CARRIER CORPORATION			S 47
(Name of Corpor	ation as currently	filed with the Florida Dept	of State)
P16000034686			智界
(Doc	nument Number of C	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Fl</i>	orida Profit Corporation ad	opts the following amend in
A. If amending name, enter the new name of the	corporation:		24.9
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp." "In "chartered," "professional association," or the abl. B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E)	ic." or "Co". A) breviation "P.A." <u>ble:</u> DDRESS)	mpany," or "incorporated" i professional corporation no	The new the abbreviation "Corp., time must contain the wor
). If amending the registered agent and/or regist new registered agent and/or the new registere		s in Florida, enter the nam	e of the
Name (Name Bartan and American			
Name of New Registered Agent			
	tFlorida street	addine)	
	ii iin iid iidee;	unur co vr	
New Registered Office Address:	——————————————————————————————————————	, , , , , , , , , , , , , , , , , , ,	Florida(Zip Code)
New Registered Agent's Signature, if changing Report the appointment as registered agent.	egistered Agent: . – I am familiar wit.	h and accept the obligations	of the position.
Sio	 mature of New Rev.	stered Agent, if changing	
ang	hamme of their trekt	active organi, g enunging	

Check if applicable

☐ The amendment(s) is/are being tited 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)

Example:

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 Doc	
X Remove	\underline{V}	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	VP,D	VELOSO, JONNATHAN	16565 SW 47 ST
Add			MIAMI, FL 33185
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	nal sheets, if necessary). (Be specific)				
						
						
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an amendm	ent provides for an ex	change, reclassific	ation, or cancella	ition of issued sha	res,	
<u>provisions fo</u>	implementing the an olicable, indicate N/A)	<u>nendment if not co</u>	ontained in the an	nendment itself:		
(if not ap)	dicable, indicate N/A)					
			_			
<u>.</u>		_				
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_	_					
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04/02/2022 The date of each amendment(s) adoption: _____ if other than the date this document was signed. Effective date if applicable: tho 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 date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 (voting group) 04/02/22 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) ROGELIO VELOSO (Typed or printed name of person signing) PRESIDENT

(Title of person signing)

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