P160000045645

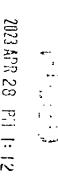
(Req	uestor's Name))
——————————————————————————————————————	ress)	
(1.55	, 555)	
(Add	ress)	
(City.	/State/Zip/Phon	
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
·	·	·
(Doc	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



500407368575

04/28/23--01016--017 *+35.00



Name Change

• COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: GRACE LIMO INC. DOCUMENT NUMBER: PIG COCO 45 645	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Brenda Nuñez	
Name of Contact Person	
Firm/ Company	
4521 W. North BSt.	
Address To more F1 321-09	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Contact Person Area Code & Daytime Telephone Number	, qu
Enclosed is a check for the following amount made payable to the Florida Department of State:	• •
\$35 Filing Fee	ا ا
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

-

Articles of Amendment

to
Articles of Incorporation

	of	i pot ation			
Ga	00 1	١			
(Name of	Corporation as currently)C filed with the Florida Dept. of Stat	<u></u>		
(<u>wante or</u>	U COCO L. S. L. L.	C	Σ)		
<u> </u>	(Document Number of	Corporation (if known)			
	(Document Number of V	Corporation (it known)			
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this F	Iorida Profit Corporation adopts the	following a	amendr	nent(s) to
A. If amending name, enter the new nar	ne of the corporation:				
Gare	Transit Inc		7	The ne	210
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co "chartered," "professional association," of B. Enter new principal office address, if (Principal office address MUST BE A ST.) C. Enter new mailing address, if applies (Mailing address MAY BE A POST O	he word "corporation," "co rp," "Inc," or "Co". A or the abbreviation "P.A." applicable: REET ADDRESS)		breviation	"Corp.	, "
D. If amending the registered agent and new registered agent and/or the new	/or registered office addre	ess in Florida, enter the name of the		2023 APR 2	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent	V(V			ထ	4
Nume of New Registered Agent	14-151		· . i	<u> </u>	· · · · · · · · · · · · · · · · · · ·
-	(Florida stree	et address)	f		
New Registered Office Address:		. Florida	1.	2	
New Registered Office Address.	(City)			(7.ip Code)	
New Registered Agent's Signature, if ch: I hereby accept the appointment as register	red agent. I am familiar wi	ith and accept the obligations of the p	osition.		
Check if applicable ☐ The amendment(s) is/are being filed pur	rsuant to s. 607.0120 (11) (e	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 = ChiefExecutive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treusurer, 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 Doc, 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
I) Change		NA	
Add			
Remove			
2) Change		NA	
Add			
Remove 3) Change		NA	
Add			
Remove			
4) Change		_ NA	
Add			
Remove			·
5) Change		_ NA	
Add			
Remove			
6) Change		NA	
Add			
 Remove			

Attach additional sheets.	, if necessary).	icles, enter char (Be specific)				
	MA					
	1/113					
<u></u>						
						
		 -				
						
				···		

		,				
If an amendment provi	enting the ame	ndment if not c	contained in the	amendment its	a snares. elf:	
provisions for implementation (if not applicable, i	indicate N/A)					
NA						
, ,						
	-					

.

The date of each amendment(s) adoption	on:	4/26	(23		, if other than the
date this document was signed.					
Effective date if applicable:		4 20	23		
	(no mo	re thần 90 đ	ays after ame	ndment file date)	
Note: If the date inserted in this block of document's effective date on the Department.			e statutory fi	ling requirements, this	date will not be listed as the
Adoption of Amendment(s)	(CHECK O	NE)			
The amendment(s) was/were adopted action was not required.	by the incorpor	ators, or boa	rd of director	s without shareholder a	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie			imber of vote	s cast for the amendme	ent(s)
☐ The amendment(s) was/were approved must be separately provided for each					ement
"The number of votes cast for th	ne amendment(s	i) was/were s	sufficient for	approval	
by					
,	(voting group	p)			
selected, by	2623 MAL or, president or, an incorporator duciary by that	– if in the h	/ - if directors ands of a rece	or officers have not be iver, trustee, or other c	en ourt
	Byer (Typed o	DACC r printed nan	NUNEZ ne of person s	signing)	
	(Title of	PST person signir	au)		