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(Re	equestor's Name)	
(Ad	idress)	
(Ac	ldress)	
(Ĉi	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

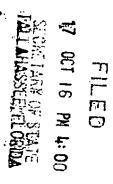
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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corpor	ations		
NAME OF CORPORADOCUMENT NUMBER	011 0000	ransport.	Inc.
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	aina Ro	cha	
_	AB All Se	Name of Contact Person	nc
_	1100 W á	19 H Stree	+
_	Hialeah, F	-L 33012	
	0 110.	City/ State and Zip Code	e
	a01100 @ a	and . Com sed for future annual report	
	E-mail address: (to be 9	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
aina R	ocha	at (305	889 - 1338 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	the following amount made p	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailie	na Address	Straat	Address

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, Fl. 32301

Articles of Amendment to

	to		1
Articio	es of Incorporation of		-
KRD Transpo	or# Inc.		
(Name of Corporation as c	currently filed with the Flo	rida Dept. of State)	
Y 160000(031	()48		
(Document Nu	umber of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corp	oration adopts the following amendment	s) to
A. If amending name, enter the new name of the corpora	tion:		
		Tt	Ì
name must be distinguishable and contain the word "cor "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc word "chartered," "professional association," or the abbrev	c." or "Co". A professione		
B. Enter new principal office address, if applicable:		* #00	
(Principal office address <u>MUST BE A STREET ADDRESS</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		-6 PM 4: 00	三四四
D. If amending the registered agent and/or registered offines registered agent and/or the new registered office:		r the name of the	
Name of New Registered Agent			
	_		
(FI	lorida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	1 Agent: amiliar with and accept the o	bligations of the position.	
Signature o	of New Registered Agent, if c	hanging	

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.

Mike Jones, V as Remove Example:	, and Sal	lly 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)	Title	Name Address
I) Change	<u> </u>	Nelson Gonzalez 12152 W Sample Ro Diaz Coral Springs, FL
Add		DIAZ Coral Springs, FL
Remove	\circ	<u> </u>
2) Change	<u> </u>	Yanelys Viguera 175 E 58 St
X Add		Olay Hialeah, FL 33013
Remove		
3) Change		
Add		·
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		***************************************
6) Change		
Add		
Remove		

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	· · · · · · · · · · · · · · · · · · ·

10/13/17	1
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no 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 wildocument's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (CHECK ONE)	1
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 east for the amendment(s) was/were sufficient for approval	1
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	;
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
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)	
x Nelson Gonzalez Diaz	
(Typed or printed name of person signing)	
× rresident	
(Title of person signing)	