Phacol 388

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: Y & L CAR TRAI	NSPORT INC			
DOCUMENT NUMBER	P16000067388				
The enclosed Articles of A	Amendment and fee are su	ibmitted for filing.			
Please return all correspon	ndence concerning this ma	tter to the following:			
		ALBA E VIVAR			
	Name of Contact Person				
	MIAMI DIS	SPATCH& CARRIER SER	VICES		
		Firm/ Company			
	8040 NW 95TH ST STE 106				
	Address				
	HIAL	EAH GARDENS, FL 3301	6		
		City/ State and Zip Code	e		
	E-mail address: (to be us	sed for future annual report	notification)		
		·	·		
For further information co	ncerning this matter, pleas	se call:			
ALBA E VIVAR		at (305	822-0255		
Name of C	ontact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the	e following amount made	payable to the Florida Depa	artment of State:		
\$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)		
Mailing Address		Street	Address		
Amenda	nent Section	Amendment Section			
	of Corporations		on of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

16 NOV 14 PM 3: 18

SECRETARY SHIATE TALLAHASMIS FUNCION

Y & L CAR TRANSPORT INC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P16000067	388
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	6447 SW 135TH AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33183
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6447 SW 135TH AVE
	MIAMI, FL 33183
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent LILIANIS DELGADO	
6447 SW 135TH AVE	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered pgent. I am familiar with and accept the obligations of the position.

 $MIAMI\cdot$

Signature of New Registered Agent, if changing

(Florida street address)

(City)

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> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	YOEL E VALDES	6447 SW 135TH AVE
Add			MIAMI, FL 33183
X Remove			
2) Change	P	LILIANIS DELGADO	6447 SW 135TH AVE
X Add			MIAMI, FL 33183
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Auach aaamon	adding additional Ai al sheets, if necessary)	. (Be specific)	-			
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provisions for	nt provides for an eximplementing the an dicable, indicate N/A)	change, reclassific tendment if not co	ation, or cancellar ntained in the am	tion of issued sha endment itself:	res.	
						

	11/10/2016	
The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement 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	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated		
Signature(By a d	irector, president or other officer – if directors or officers have not been	_
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	YOEL E VALDES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	