## lorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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R. WHITE ETO 19 2073

pivision of Corporations

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: INTERSTATE CARRIER SERVICE CORP Account Name

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Phone

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ä

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

MAGIC ROAD INC

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Corporate Filing Menu

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## COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: MAGIC ROAD INC				
DOCUMENT NUMBER: P16000095095				
The enclosed Articles of Amendment and fee are sub-				
Please return all correspondence concerning this matt	er to the following:			
JORGE MORALES				
<del></del>	Name of Contact Person			
MAGIC ROAD INC				
	Firmy Company			
4525 NW 4TH TER				
	Address			
МІДМІ FL 33126				
	City/ State and Zip Code			
	CONTROL COM			
INTERSTATECARRIERSERVICE	(all AHOO.COM	atification)		
E-mail address: (to be us	ed for future annual report n	(Mineadolly		
For further information concerning this matter, pleas	e call:			
LOURDES GARCIA  Name of Contact Person	786	3466290		
Name of Contact Person	Area Cod	e & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee S43.75 Filing Fee & Certificate of Starts	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52,50 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	Amend Divisio Clitton 2601 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301		

FILED

Articles of Amendment Articles of Incorporation of

2018 DEC 18 PM 8:58

SECRETARY OF STATE

MAGIC ROAD INC	ialladaste.fl
(Name of Corpora	tion as currently filed with the Florida Dept. of State)
P16000095095	
	ument Number of Corporation (if known)
	ida Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the	corporation:
	The new
name must be distinguishable and contain the w "Corp" "Inc.," or Co.," or the designation "Co. word "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" or the abbreviation rp," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)	ble: DDRESS )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BON
new registered agent and/or the new register	stered office address in Florida, enter the name of the ed office address:
	(Florida street address)
	Chaide
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: ii. I am familiar with and accept the obligations of the position.
	Signature of New Revistered Agent If changing

If amending the Officers aud/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 Dee, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Ada.

Example: _X_Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Şally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	ų	JORGE MORALES	4525 NW 4TH TER
			MIAMI FL 33126
Add X Remove			
2) Change	P	ANDRES F VASQUEZ	15066 SW 104TH ST APT 1503
X Add			MIAMI FL 33196
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
5) Change			
Add			
Remove			

	(Br specific)
For an exception for an exc	change reclassification, or cancellation of issued shares,
f an amendment provides for an ext provisions for implementing the am	change, reclassification, or cancellation of issued shares, sendment if not contained in the amendment itself:
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f an amendment provides for an ext provisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, it other than the
date this document was signed.	
Effective date if applicable:	<del></del>
(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 with document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ 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	
by (voting group)	
(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.	
12/14/2018	•
Dated	
· · · · · · · · · · · · · · · · · · ·	
Signature  (By 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)	
JORGE MORALES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	