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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AMA Express	Transport Inc.		
DOCUMENT NUMBER: P16000098054			
The enclosed Articles of Amendment and fee a	re submitted for filing.		
Please return all correspondence concerning thi	s matter to the following:		
William Rosario			
N/A Willi	am Rosaric		
N/A 1373	2 Caden Glen Dr. SON FL 34669		
N/A Helds	501 FL 34669		
amaexpresstransport@gmail.co	om		
E-mail address: (to	be used for future annual report notification)	
For further information concerning this matter,	please call:		
William Rosario	at (352) 631-245	7	
Name of Contact Person	Area Code & Daytir	ne Telephone Number	
Enclosed is a check for the following amount m	ade payable to the Florida Department of S	tate:	
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	us Certified Copy Certifie (Additional copy is Certifie	Filing Fee rate of Status of Copy onal Copy osed)	
Mailing Address	Address Street Address		
Amendment Section	Amendment Section		
Division of Corporations	Division of Corpor	ations	
P.O. Box 6327 Tallahassee, FL 32314	P.O. Box 6327 Clifton Building		
rananassee, ris 32314	2001 EXCOUNTE OF	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	of	-	from trans
AMA Express Transport Inc.			The state of the s
(Name o	of Corporation as currently	filed with the Florida Dep	pt. of State)
P16000098054		_	2011 ЛРЯ - 4 Р 12 24
Pursuant to the provisions of section 607.		Corporation (if known)	STATE ANASSEE, FLORIGA
its Articles of Incorporation:	1000, 1 lorida trastates, tills	toria i roja corporation	idopis ine tonowing amendment(s) i
A. If amending name, enter the new na	ime of the corporation:		
N/A			77
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	Co". A professional corpo	
B. Enter new principal office address,	if annlicable:	13732 Caden Glen Drive	
(Principal office address MUST BE A S		Hudson, FL 34669	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		13732 Caden Glen Drive	
		Hudson, FL 34669	
D. If amending the registered agent an	d/or registered office addr	ess in Florida, enter the na	ame of the
new registered agent and/or the nev			mic or the
Name of New Registered Agent	N/A		
New Registered Office Address:	(Florida stre	et address)	
	N/A		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	hanging Registered Agent:	City) ith and accept the obligatio	(Zip Code) ons of the position.

Signature of New Registered Agent, if changing

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 = Trustce; 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
<u>X</u> Add	\$ <u>V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Emilia L. Soto	13732 Caden Glen Drive
X Add			Hudson, FL 34669
Remove			
2) Change	P	James Pope	104 Harding Avenue
X Add			Pen Argyl, PA 18072
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
N/A	
, 	
7-91-11	
	F
If an amandment muscides for an arch	and the second s
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

N/A
The date of each amendment(s) adoption:, if other than the date this document was signed.
N/A
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 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 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 cast for the amendment(s) was/were sufficient for approval
by N/A (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.
03/25/2018
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)
William Rosario
(Typed or printed name of person signing)
President Williams
(Title of person signing)