# P17000007470

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SECRETARY OF STATE
TAN A MASSEE, FLOSIOA

MAY 1 7 2017

S. PRATHER

# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: HD TRANSPORT	EXPRESS INC			
DOCUMENT NUMBI	P17000007470				
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.			
Please return all corresp	ondence concerning this ma	atter to the following:			
		ALBA E VIVAR			
' -	Name of Contact Person				
	MIAMI DISPATCH & CARRIER SERVICES				
Firm/ Company					
	8040 NW 95TH ST STE 106				
_	Address				
	HIALEAH GARDENS, FL 33016				
_		. City/ State and Zip Code	<del> </del>		
-12-7 \$1	E-mail address: (to be us	sed for future annual report	notification)		
	`		,		
For further information	concerning this matter, pleas	se call:			
ALDA E WIWAD		205	922 0255		
ALBA E VIVAR		at ( 305	822-0255		
Name of	Contact Person	Area Coo	le & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depar	rtment 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)		
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amendi Division Clifton 2661 Ex	Address ment Section n of Corporations Building recutive Center Circle ssee, FL 32301		

### Articles of Amendment to Articles of Incorporation of

# HD TRANSPORT EXPRESS INC

(Name of Corporation as curre		ot. of State)
. P1700000		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	nis Florida Profit Corporation a	idopts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	r "Co". A professional corpor	The new orated" or the abbreviation ration name must contain the
B. Enter new principal office address, if applicable:	N/A	至 三
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		32 5 F
		To R
C. Enter new mailing address, if applicable:	N/A	ිල <b>්                                    </b>
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	N/A	<u> </u>
	4. *	
	·	
D. If amending the registered agent and/or registered office as		me of the
new registered agent and/or the new registered office addr N/A	<u>css:</u>	
Name of New Registered Agent		
<u></u>		
(Florida	street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familio	e <u>nt:</u> ar with and accept the obligation	ns of the position.
, , , , , , , , , , , , , , , , , , , ,	, , 3	•
		<del></del>
Signature of Nev	w 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 = 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 <math>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	<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
1) Change	VP	NELSON LUCAS OROZCO	4217 13ST SW
Add			LEHIGH ACRES, FL 33976
X Remove			
2) Change		_ <u></u>	
Add			
Remove			
3) Change			
Add			<del></del>
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
•	
	· · · · · · · · · · · · · · · · · · ·
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	numere is not contained in the amendment itself.
N/A	
<del></del>	

The date of each amendment(s) adoption: date this document was signed.	_, if other than th
Effective date if applicable:  (no more than 90 days after amendment file date)	
. (no more than 90 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as th
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	5
by"	司基丁
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	T P I
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	13: 33
05/12/2017	
Signature Hart	
(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)	
RAYSANIA MARTINEZ	
(Typed or printed name of person signing)	<del></del>
PRESIDENT	
(Title of person signing)	<del></del>