P17000016754

(Re	equestor's Name)	<u>·</u>
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COVER LETTER

TO: Amendment Section

Division of Corpo	orations		
NAME OF CORPOR	RATION: <u>Clean</u> BER: P 17	Transportat 0000 1675	tion Inc
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
- -	Clean Trans 8920 Pembroke	Name of Contact Person Sportation Firm/ Company Schnson St. Address Pines FL 3. City/ State and Zip Code Sed for future annual report	Inc reet 3024
	concerning this matter, please		
J:/ca.	na Barbic	at (95 4	de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment 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)
	ling Address ndment Section		Address ment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

(Ivaine of Corporation a	is currently filed with th	ie Florida Dept. of S	<u>tate</u>)
(Document	Number of Corporation ((if known)	
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	ntutes, this <i>Florida Profit</i>	Corporation adopts	the following amendment(s)
A. If amending name, enter the new name of the corpo	ration:		
N/A			The new
name must be distinguishable and contain the word "dearp.," "Inc.," or Co.," or the designation "Corp.," "professional association," or the abbut the containing of the contai	Inc," or "Co". A profe reviation "P.A."	," or "incorporated ssional corporation"	" or the abbreviation name must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered of	office address in Florida	N/A	
new registered agent and/or the new registered office		enter the name of	<u>tne</u>
Name of New Registered Agent	N/A		
	(Florida street address)		
New Registered Office Address:		, Flor	ida
	(City)		(Zip Code)
lew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		t the obligations of th	e position.

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.

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>	Address
1) Change	_S_	Mladen Burbie	e 8920 Jonson Str.
⊀ Add			Pembroke Pines
Remove			FL 33 024
2) Change			·······
Add			
Remove			
3)Change		·	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

raupon additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
	N/A	•
· · · · · · · · · · · · · · · · · · ·	N/N	
·		
		,
		
		•
f an amendment provides for an exch	ange, reclassification, or cancellation of iss	sued shares,
provisions for implementing the ame	ndment if not contained in the amendment	<u>itself:</u>
(if not applicable indicate V/4)		
(if not applicable, indicate N/A)	. /.	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	
(if not applicable, indicate N/A)	N/A	

The date of each amendment(s) acd the this document was signed.	loption:	, if other than the
ū	4/13/17	
Effective date it applicable.	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requipartment of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for fficient for approval.	the amendment(s)
	roved by the shareholders through voting groups. The faceach voting group entitled to vote separately on the am	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder actio	n and shareholder
action was not required.	pted by the incorporators without shareholder action and	d shareholder
Dated	4/13/17 July Dac	
Signature	in Dac	
(By a di selected	irector, president or other officer – if directors or officer d, by an incorporator – if in the hands of a receiver, trust and fiduciary by that fiduciary)	s have not been see, or other court
	(Typed or printed name of person signing)	с
	(1 yped or printed name of person signing)	
	President (Title of person signing)	
	(Title of person signing)	