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MAR 2 2 2016 T. LEMIEUX



COVER LETTER

Division of Corporations NAME OF CORPORATION: _____TAXI PLUS INC DOCUMENT NUMBER: P17000019974 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

TO: Amendment Section

	Name of Contact Person	
N/A		
	Firm/ Company	
344 MERIDIAN AVE. APT #3	3A	
	Address	
MIAMI BEACH, FL33139		
	City/ State and Zip Code	

For further information concerning this matter, please call:

PATRICK O'NEILL at (786) 285-6619

Area Code & Daytime Telephone Number Name of Contact Person

E-mail address: (to be used for future annual report notification)

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

is enclosed) **Mailing Address**

Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Street Address

Articles of Amendment to

Article	es of Incorporation			
Tax: Plus	of T			
(Name of Corporation as c		Classida Dona af Casa		
(Name of Corporation as c	O O 1	Horida Dept. of State	<u>e)</u>	
P1 10000 1	77/4			
(Document Nu	umber of Corporation (if)	known)		
Pursuant to the provisions of section 607.1006. Florida Statute its Articles of Incorporation:	es, this <i>Florida Profit C</i> o	prporation adopts the	following amend	dment(s) to
A. If amending name, enter the new name of the corporat	lion:			
			The	new
name must be distinguishable and contain the word "cor," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	"," or "Co". A professi	or "incorporated" o onal corporation nan	or the abbrevia ne must contain	tion the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				_
				_
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	ce address in Florida, e	nter the name of the		_
Name of New Registered Agent			_	
			····	
(Flo	orida street address)			
New Registered Office Address:		, Florida_	<u> </u>	
	(City)		(Zip Code)	
Now Desistance Agent's Company of should be Desistant	A			
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	<u>Agent:</u> miliar with and accept th	e obligations of the	osition.	
	•		SEC SEC	
		A		**
		A	# 3 3 3 3 3 3 3 3 3 3	aliante.
Signature of	New Registered Agent, (f changing -	₹ 1 [975 <u>Ω</u> Liù.
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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 = Tre-isurer; 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 Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	YESINET ROLANDO	344 MERIDIAN AVE. APT #3A
XAdd			MIAMI BEACH, FL
Remove			33139
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

uacu <i>aaantonat</i>	sheets, if necessary). (Be sp	ecific)			
				<u></u>	
-		·			
			· · ·		
				#:	
					
				chavas	
<u>an amenamen</u> Provisions for it	provides for an exchange, replementing the amendment	if not contained in t	he amendment itsel	<u>snares.</u> f:	
(if not appli	able, indicate N/A)		······································	_	
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					_

The date of each amendment(s) adoption date this document was signed.	1:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this cent of State's records.	late will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	y the shareholders. The number of votes east for the amendment for approval.	(s)
	by the shareholders through voting groups. The following staten oting group entitled to vote separately on the amendment(s):	1ent
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	y the board of directors without shareholder action and sharehold	ier
The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder	
Dated	0/14/17	
Signature	inet Molrando	
selected by ar	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other couciary by that fiduciary)	ırt
YESIN	JET ROLANDO	
	(Typed or printed name of person signing)	
REGIS	STERED AGENT	
	(Title of person signing)	