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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	JM Transporting SoraTION:	ervices, Inc.	
DOCUMENT NUM	P17000043255		
The enclosed Article	s of Amendment and fee are su	bmitted for tiling.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Jonathan McIntyre		
		Name of Contact Persor	1
	JM Transporting Services, In	c.	
		Firm/ Company	
	21460 SW 109 Ave.		
		Address	***
	Miami, FL. 33189		
		City/ State and Zip Cod	<u>e</u>
jonl	55m@yahoo.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Jonathan McIntyre		786 at (229-9985
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check (or the following amount made j	payable to the Florida Depa	irtment 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)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2664 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

FILED

17 NOV -6 AHII: 56 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

address of each Officer Attach additional sheet Please note the officer/a P = President; V= Vice Executive Officer; CFO held, President, Treasto Changes should be note i change, Mike Jones lo Mike Jones, V as Remov	and/or 1 s, if neces lirector til Presiden Chief er, Direct d in the fa	isary) the by the first letter of the office title; the by the first letter of the office title; the treasurer; S= Secretary; D= Director; Financial Officer, If an officer/director holds tor would be PTD, ollowing manner, Currently John Doe is listed	TR= Trustee; C = Chairman or Clerk; GEO = Chies more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change
E xample: - <u>X-</u> Change	<u>1.1.</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change	V	Jonathan McIntyre	21460 Sw 109 Ave.
Add			Miami, FL. 33189
Remove			
2) Change	V	Tyrone Johnson	11341 Sw 242 St.
$\frac{1}{X}$ Add			Homestead, FL. 33032
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(i) Change			
Add			
Remove			<u> </u>

mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)	1	
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an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself:		II.
(if not applicable, indicate N/A)	•	-
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	<u> </u>
(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 widocument's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	i
☐ 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)	}
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.	
Dated	1
L Signature Donathan M. Cutya	
(B) 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)	
Jonathan McIntyne	<u>.</u>
(Typed or printed name of person signing)	
Honothan Weather	
(Title of nerson signing)	· II