P17000059704

(R	Requestor's Name)			
(A	.ddress)			
(A	ddress)			
(C	City/State/Zip/Phone #))		
PICK-UP	☐ WAIT	MAIL		
<u> </u>	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to	o Filing Officer:			

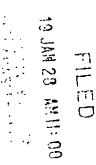




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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: 486 Prestigious Auto tromportino
DOCUMENT NUMBER: <u>\$17000059709</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person 886 Prestigious Anto transport Firm/ Company Address
Address To-trop: FL 33 Color City/ State and Zip Code Give Color Colo
For further information concerning this matter, please call:
Name of Contact Person at (81) 860-7805 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

(& & brest	igious Auto transport inc.
(Name of Corporation as currentl	y filed with the Florida Dept. of State)
70000Tig	19704
	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
(+ & (+ Dc	Estigious trasporting. The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	n," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	A
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:	(City) , Florida (Kip Code)
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.
WR	Registered Agent, if changing
Signature of New I	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)

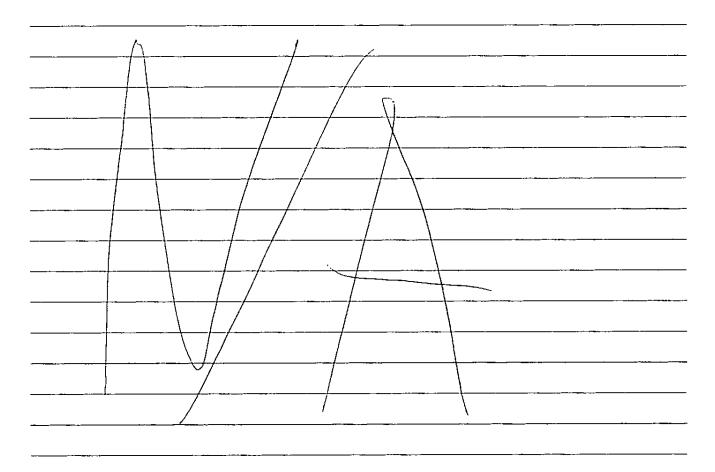
Please note the officer/director title by the first letter of the office title:

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 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.

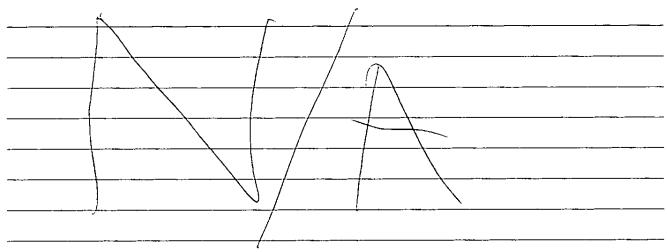
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name h / /	<u>Addres</u> s
1) Change			\\\(\)
Add		,	- H-A-
Remove		1	
2) Change		- WA	
Add		Į.	
Remove		2111	
3) Change			
Add		}	
Remove		") 7	
4) Change			
Add		,	
Remove			
5) Change		NA	
Add		1	
Remove			10/ 7
6) Change		MX	
Add			111
Remove			1014

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)



F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,

provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)



The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 0/128/20/d	
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 dateournent's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	8)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	сг
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 0 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Signature Fullul & 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 cou	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	0/20
(Typed or printed name of person signing)	
Dresident	···
(Title of person signing)	