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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: KEMLYS TRANPSORT INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Pleasefreturn all correspondence concerning this matter to the following: KEYSHA M COLON Name of Contact Person KEMLYS TRANSPORT INC Firm/ Company 148 COUNTRY WALK CIRCLE Address DAVENPORT FL 33837 City/ State and Zip Code For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$\$5 Filing Fee. □\$43.75 Filing Fee & □S43.75 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** Street 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

Articles of Amendment to Articles of Incorporation of

of
KEMLYS TRASNPORT INC
(Name of Corporation as currently filed with the Florida Dept. of State)
P1700 <mark>0</mark> 064913
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new 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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)
C. Enfer 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) (Zip 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.
SECTION IN THE SECTIO
Signature of New Registered Agent if changing Fife

Page 1 of 4

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 = ChiefExecutive 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: \underline{X} Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Address</u>
T) Change	VP	WESLLI BETANCOURT PEREZ	5801 FOREST RIDGE DR
X Add	.,		WINTER HAVEN FL 33881
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		•	
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

<u>If amending or adding additional Arti</u> Att ac h <i>additional sheets, if necessary),</i>	(Be specific)
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f anlamendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	endinent if not contained in the amendment fixen:
.,, .,,	
1	
1	

[07/02/18	
The date of each amendment(s) adopti	он;	, if other than the
date this document was signed.		
07/02/18 Effective date <u>if applicable</u> :	3	
Effective date <u>it applicable</u> :	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block document's effective date on the Departi		requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was were sufficient	by the shareholders. The number of votes casent for approval.	t for the amendment(s)
	d by the shareholders through voting groups. It voting group entitled to vote separately on th	
"The number of votes cast for t	he amendment(s) was/were sufficient for appro	wal
bv		
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action	on and shareholder
Dated 7/2/2	018	
Signature	or, president or other officer – if directors or o	Officers have not been
selected, by	an incorporator – if in the hands of a receiver, iduciary by that fiduciary)	
	Heista U. Cdon 1Tiped or printed name of person signif	ng)
	Cresident (Title of person signing)	
	Critic of berson signing)	