P17000065065

(Requ	estor's Name)	
(Addre	ess)	
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(6.1.1.	>	
(Addr	ess)	
(City/S	State/Zip/Phone #))
PICK-UP	☐ WAIT	MAIL
/Pusi	ness Entity Name)	
(Duşii	less Entity Name)	
(Docu	iment Number)	
Certified Copies	Certificates of	Status
		
Special Instructions to Fil	ing Officer:	

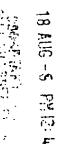
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S TALLENT AUG 0 9 2018



COVER LETTER

Division of Corporations NAME OF CORPORATION: A.N.T. DOCUMENT NUMBER: 217 0000 05765 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 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

TO: Amendment Section

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

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

A.N.T. E	XPRESS I	VC		
(Name of Corpora	tion as currently filed with t	the Florida Dept. of State)	-	
P1700006	5065			
	ument Number of Corporation	(if known)		
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	da Statutes, this Florida Prof	it Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the	corporation:			
			The new	
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	rp," "Inc," or "Co". A proj			
B. Enter new principal office address, if applicab			- <u>-</u>	
(Principal office address <u>MUST BE A STREET AL</u>	ODRESS)			
			हिंदी कि m	
		······································	- Jan	
C. Enter new mailing address, if applicable:			型型	
(Mailing address MAY BE A POST OFFICE B	<u> </u>			
			77. 4 7	
			, 63	
				
D. If amending the registered agent and/or regist		ia, enter the name of the		
new registered agent and/or the new registere	d office address:			
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:		, Florida		
HEB REGISTER COJEC MUNICIS.	(City)	, 1 10110.1	(Zip Code)	
New Registered Agent's Signature, if changing Re		and the english	••	
I hereby accept the appointment as registered agent.	. I am familiar with and acce	rpt the obligations of the pos	tion.	
Sig	gnature of New Registered Ag	ent, 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	PT John D	l <u>oe</u>	
X Remove	V Mike J	<u>ones</u>	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	15D	Berline bloom	851 NE 50th
X Add			Ct. Pompreno
Remove			Beach, FL, 33064
2) Change	YP	Abhley Reyes	1505 W Donegan
Add)	Due apt B, hissimme
Remove 3) Change	P	Rendu molder	FL, 33/1741
Add		Certain stage	1525 W Donogan Ave apt B. Kissimmer,
Remove			FL, 34741
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	
	•
in amendment provides for an exchange, reclassification, or cancellation of issued shares,	
rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(y nor apprecione, militare (viii)	
······································	
	
	<u> </u>
-	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: 08/03/2018	
(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 will document's effective date on the Department of State's records.	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(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 08/03/2018	
Signature Legg	
(By a director, prosident or other officer - if directors or officers have not been	
selected, by an incorporator $\frac{\mathbf{v}}{\mathbf{v}}$ if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Ashley Reyes	<u>-</u>
(Typed or printed name of person signing)	
VP	
(Title of person signing)	