## P17000072834

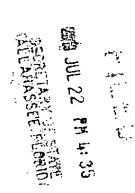
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TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: TEP TRANSPORT GRP  DOCUMENT NUMBER: P 17000072834				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
HOHNATTAN OCASIO  Name of Contact Person				
Firm/ Company				
7620 CARIYLE AUEIIUE  Address  Flami Bench FL. 33/4/  City/ State and Zip Code				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
TUHINIAL TAN CASIO at (305) 360-2705  Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status  (Additional copy is enclosed)  Certificate of Status  Certified Copy  (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently	y filed with the Florida Dept. of State)	3
TEP TRIVISPORT CONP. #	P17000072831	
	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amenda	್ಲ್ nent(s) to
A. If amending name, enter the new name of the corporation:	/ ^	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain th	)/I
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 address:  new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stre	vet 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 w	ith and accept the obligations of the position.	
	~ / is	
Signature of New Re	gistered 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	ŕ	ohn Doe	
X Remove			
		Aike Jones	
X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P.	Estela ReyGADA	2742 N.W. 24 Frage
Add			
Remove			
2) Change	<u>P</u>	JOHNATTA Vasio	7620 CARTYLE AUE. Mr AMI BENCH F. 1. 33M1
Add			MI AMI BENCH 1-1.33141
Remove			<del></del>
3 ) Change			
Add			
Remove			
4) Change			
Add		r	
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change	<i>(</i>		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
GAMMERS SHOULD be noted AS FOLLOWS.	
CHANGES SHOULD be noted AS FOLIOUS.  VIESTELA REYGADA KAS BEEN REPLACED by THE  MAN PRESIDENT MA. JOHNATIA (CASIO effect  7-10-19.	
new president Mn. Johnatia Considerties	In
7-10-19	
<del></del>	
<del></del>	
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)	
V/A	

The date of each amendment(s) adoption: date this document was signed.	07-10-19	, if other than the
Effective date if applicable:	07-10-19	
	(no more than 90 days after amendment file date)	)
Note: If the date inserted in this block does redocument's effective date on the Department of	not meet the applicable statutory filing requirement State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (CH	IECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes east for the ame approval.	endment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	e shareholders through voting groups. The following group entitled to vote separately on the amendmen	g statement et(s):
	ndment(s) was/were sufficient for approval	
by	ting group)	
(voi	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and sh	nareholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareh	older
Dated 07-10	· · · · · · · · · · · · · · · · · · ·	
Signature (By a director, presiselected, by an incoappointed fiduciary	ident or other officer – if directors or officers have no orporator – if in the hands of a receiver, trustee, or of by that fiduciary)	not been ther court
<u>ESTE</u>	Typed or printed name of person signing)	
83b	la Dengada / f	PRESIDENT