11/15/2019

Florida Department of State (Division of Componitions Electronic Filing Gover Sheet

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Tc:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAXMY'S CARRIER SERVICES

Account Number : I20040000007 Phone : (305)640-0281 Fax Number : (305)489-2902

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address

your taxmys camer cognant. a

COR AMND/RESTATE/CORRECT OR O/D RESIGN

CAA INTERSTATE CORP

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Certificate of Status	0
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Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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COVER LETTER

TO: Amendment Sect Division of Corp			
NAME OF CORPO	RATION: CAA INTERSTA	TE CORP	
DOCUMENT NUM			
	of Amendment and fee are st	iomitted for filing.	
Please return all come	spondence concerning this ma	atter to the following:	
	ABEL SALCEDO		
		Name of Contact Person	1
	CAA INTERSTATE CORP		
		Firm/ Company	
	7434 W 30 CT		
		Address	· · · · · · · · · · · · · · · · · · ·
	HIALEAII, FL 33018		
		City/ State and Zip Code	¢
I.A.Y.	MYC2001@YAHOO.COM		
	•	sed for future annual report	notification)
	•	•	•
For further information	n concerning this matter, pleas	sc call:	
LAXMY CHACON		nt (³⁰⁵	_) 640-0281
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address indment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisic Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssec, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

		SUST MENTIC SO THE PO
(Name	of Corporation as currently filed wi	th the Florida Dept. of State)
P17000079417		
And the state of t	(Document Number of Corporat	ion (if known) - LARAGELL - TLORIDA
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006. Florida Statutes, this Florida P.	rofit Corporation adopts the following amendment(
A. If amending name, enter the new n	ame of the corporation:	
		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc." or "Co". A p	pany," or "incorporated" or the abbreviation professional corporation name must contain the
B. <u>Enter new principal office address.</u> Principal office address <u>MUST BE A S</u>		
	physical states	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
D. If amending the registered agent at new registered agent and/or the ne		ridg, enter the name of the
Name of New Registered Agent	EDELBERTO ACOSTA	
transe of the water carrier carrier	11020 Minus Parlament 207	
	11820 Miramar Parkway suite 307	
	[Florida street address)
New Revisiered Office Address:		33025

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. Fresident, 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 Doc, PT as a Change. Mike Jones, V as Remove, and Saily Smith, SV as an Add.

X Change	<u>PT</u> <u>John</u>	1 Doc	
X Remove	Y Mik	e Jones	
_X Add	<u>SV</u> <u>Şalf</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	ABEL SALCEDO	7434 W 30 CT
Add			HIAKEAH FL 33018
X Remove			
2) Change	P	EDEOBERTO ACOSTA BAZAR	11820 MIRAMAR PKWY
X Add			STE 307
Remove			MIRAMAR FL 33025
3) Change	VP	RUBEN OSCAR RAMOS	11820 MORAMAR PKWY
X Add			STF. 307
Reniove			MIRAMAR FL 33025
4) Change			
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
δ) Change			
Add			
Remove			

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 NA)	(Attach additional sheets, if necessary).). (Be specific)
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)		
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11/15/2019	
The date of their adienoments, and an animal and an animal	, if other than the
date this document was signed.	
11/15/2019	
Effective date if applicable: (no more than 90 days after amende	osens file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date 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 comby the shareholders was/were sufficient for approval.	est for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups, must be separately provided for each voting group entitled to vote separately on the separately of the separate	The following statement the amendment(s):
The number of votes cast for the amendment(s) was/were sufficient for appr	roval
hy(voting group)	, n
(voting group)	
 The amendment(s) was/were adopted by the board of directors without shareholde action was not required. The amendment(s) was/were adopted by the incorporators without shareholder act action was not required. 	
11/14/2010	
11/15/2019 Dated	
At Suff	
Signature	
(By a director, president of other afficer - if directors or selected, by an incorporator - if in the hands of a receive appointed fiduciary by that fiduciary)	officers have not been r, trustee, or other court
ABEL SALCEDO	
(Typed or printed name of person sign	ning)
PRESIDENT	
(Title of person signing)	