Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000063742 3)))



H230000637423ABC

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : MAYNARD COOPER & GALE, P.C.

Account Number : I20220000140 Phone : (407)647-2777 Fax Number : (407)647-2157

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

Email Address: MILLS OM MULLA CORPER. COM

# COR AMND/RESTATE/CORRECT OR O/D RESIGN MARIC TRANSPORTATION CORP

Certificate of Status	0
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J. HORNE

FEB 2 3 2023

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February 20, 2023

FLORIDA DEPARTMENT OF STATE Division of Corporations

MARIC TRANSPORTATION CORP 11137 ROBIN NEST CT JACKSONVILLE, FL 32225US

SUBJECT: MARIC TRANSPORTATION CORP

REF: P17000090738

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must list a date of adoption.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline FAX Aud. #: H23000063742

Regulatory Specialist II Supervisor Letter Number: 623A00004093

## 11230000637423

### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Marie Transportat	ien Corp		
DOCUMENT NUM	BER: P17000090738			
	of Amendment and fee are st	dunitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	Brian A. Mills, Esquire			
		Name of Contact Person	<del></del>	
	Maynard, Cooper & Gale, P.	C. Corporation		
	Firm/ Company			
	200 East New England Aven	nic, Suite 300		
		Address		
	Winter Pack, Florida 32789			
		City/ State and Zip Cod	e	
	-bmills@maynardcooper.com			
	•	sed for future annual report	notification)	
For further informatic	on concerning this matter, plea	se call:		
Brian A. Mills, Esqu	re, for the Firm	407 at (	047-2777 ce & Daytime Telephone Number	
Name of Centact Person		Area Co	ce & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Dep.	artment of State:	
S35 Filing Fee	□\$43.75 Piling Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, F1, 32314	Amend Divisio The Co 2415 (	Address ment Section on of Corporations entre of Tullahassee x. Monroe Street, Suite \$10 usee, FL 32303	

•			
	H230000	63742 3	202 SE
	Articles of a		
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	Articles of In	•	S - V
A	0	l	
Maric Transportation Corp			
(Name	of Corporation as current	ly filed with the Florida Dept. o	of State)
P17000090738			en state)
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adog	ots the following amendme
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Sorp, " "Inc, " or "Co" =	A professional corporation non	the abbreviation "Corp."
B. Enter new principal office address, if applicable:		N/A	
(Principal office address MUST BE A S			
			- <b>-</b>
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	
intuiting datatess plant by A POST	(77 T. C. T. 11(7.X)		
		,	
D. If amending the registered agent ar	id/or registered office add	tress in Florida, enter the name	of the
new registered agent and/or the ne-	w registered office addres	<u>5:</u>	
Name of New Registered Agent	Maynard, Coope: & Gale	, P.C. Corporation	
	200 Fast New England A	venue, Suite 300	
	<del></del>	rcet address)	
	•		32789
New Registered Office Address:		. I	lorida
		n, ny	ezip Coney
Now Davistaged Apart's Singularya 10 a	hanning Pagietoral Agan	,.	
New Registered Agent's Signature, if e I haveby accept the appointment as regist	nunging Registeren Agen VereJ ageni - Lam familiar	<u>r:</u> with and accept the obligations o	of the position
, , , , , , , , , , , , , , , , , , , ,			
	C. J.		
-	Signature of New 1	Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Example:

#### H23000063742 3

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 F. 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

X Change	<u>PT</u> <u>Jot</u>	<u>in Doc</u>	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			·
2) Change			
_,, Add			
Remove 3 ) Remove	<del></del> -		
Add			
Remove			<u></u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

### H23000063742 3

E. <u>If amending or adding additional Arti</u> (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	
P-71 - 71 day 11-71 - 12-12-12-12-12-12-12-12-12-12-12-12-12-1	· · · · · · · · · · · · · · · · · · ·
<ul> <li>If an amendment provides for an exch provisions for implementing the amer</li> </ul>	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself;
(if not applicable, indicate N/A)	
N/A	

H23000063742.3

The date of each amendmen date this document was signed		if other than th
Effective date <u>if applicable</u> :	N/A	
<del></del>	(no more than 90 days after unendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory. Hing requirements, this be Department of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder	action and shareholder
	re adopted by the shareholders. The number of votes east for the amendmere sufficient for approval.	ent(s)
	re approved by the shareholders through voting groups. The following sta- ed for each voting group entitled to vote separately on the amendment(s)	lement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated	· —	
Signatura	enis Savičski Svor stolet iz sto	
(B	y a director, president or other officer - if directors or officers have not be lected, by an incorporator - if in the hands of a receiver, trustee, or other oppointed fiduciary by that fiduciary)	
	Denis Savitski	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	