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2018 JUN -4 PM 4: 31
SECRETARY OF STATE

C. GOLDE\*\*

JUN - 5 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	ON: KM	IAYEA TRANSPO	RT CORP	
DOCUMENT NUMBER:	P1800000	00768		
The enclosed Articles of Ar	nendment and fee are su	bmitted for filing.		
Please return all correspond	lence concerning this mat	ter to the followin	ıg:	
		ALAN MARTI	NEZ	
		Name of Conta	act Person	
		SIMPLEX G	ROUP	
		Firm/ Con	npany	
		5800 NW 74TH	AVE	
		Addre	SS	
		MIAMI, FL 33		
		City/ State and	Zip Code	
	amartinez	@simplexgroup.ne	et .	
	E-mail address: (to be us	sed for future annu	ial report n	otification)
For further information con	cerning this matter, pleas	se call:		
ALAN MARTINEZ / SI	MPLEX GROUP	at (	305	) 599-8287
Name of Contact Person			Area Cod	e & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Flo	rida Depar	tment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional co enclosed)	у	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Division Clifton I	nent Section of Corporations

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

K MAYEA TRANSPORT CORP

2018 JUN -4 PM 4: 31

	K WATEA TRANSFOR	LOKE	
(Name of C	orporation as currently file	d with the Florida Dept.	OF STATE OF ST
	P18000000768		IALLAHASSEE, FLO
	(Document Number of Cor	poration (if known)	
Pursuant to the provisions of section 607.1000 ts Articles of Incorporation:	6, Florida Statutes, this Flori	da Profit Corporation ado	pts the following amendment(
A. If amending name, enter the new name	of the corporation:		
			The new
name must be distinguishable and contain "Corp" "Inc.," or Co.," or the designation word "chartered," "professional association	n "Corp," "Inc," or "Co".	A professional corporati	ated" or the abbreviation ion name must contain the
3. Enter new principal office address, if a Principal office address MUST BE A STRE			<del></del>
	_		
	-		
C. Enter new mailing address, if applicabe (Mailing address MAY BE A POST OF)		_	
<u> </u>			
	<del></del>		
	-		<del></del>
<ol> <li>If amending the registered agent and/or new registered agent and/or the new re</li> </ol>		n Florida, enter the name	e of the
Name of New Registered Agent			
_	(Florida street a	ldress)	<del></del>
New Registered Office Address:			Florida
New Registered Office Juda ess.	(City		(Zip Code)
New Registered Agent's Signature, if chan	aina Registered Agent:		
hereby accept the appointment as registered	d agent. I am familiar with	and accept the obligations	of the position.
	Signature of New Regis	tered Agent if changing	<del></del>

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check Cne)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	PEREZ FUENTES, LEONEL	228 NW 48TH PL
X Add			MIAMI, FL 33126
Remove			
2) Change			_
Add			
Remove			
3 ) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	•	
	<del></del> -		
		<u> </u>	
		<del></del> _	
			<del></del>
	<del></del>		
f an amendment provides for an exc	hange, reclassification, or	cancellation of issued sh	ares,
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained i	n the amendment itself:	
()			
	<del></del>		
		<del> </del>	

	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	s 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 cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	'ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareh action was not required.	older
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	r
5/29/18	
Dated	
Signature Signature	
director, president or other officer – if directors or officers have not be	
selected, by an incorporator - if in the hands of a receiver, trustee, or other	court
appointed fiduciary by that fiduciary)	
JESUS L MAYEA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	