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COVER LETTER

Division of Corporations CODY & CODY TRANSPORTATION CORP 180000 13001 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (754) 28/-3447 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Articles of Amendment

to Articles of Incorporation

FILED 3: 28

of	2018 DEC 20 FH 3
coly & cody transportation corp	AHASSET, T
	" AHASSEE, HI
P 18 0000 13 001	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follits Articles of Incorporation:	owing amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company." or "incorporated" or to "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name is word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) North Miami Beach	must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) North Mineri Beneficial Company Benefi	24 Blud 6 H33162
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent DANA COV	33140 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positive of New Region Fed Agent, if changing	ition.

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	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address #
1) Change	<u> </u>	GEORGE TeichneR	2401 Collins Aye #401
Add			Minni Bendi Fl. 33140
Remove			
2) Change	7	Goorge Teichver	Ninn: Bend H. 33140
Add			THE PERIOD OF
Remove 3) Change	Ĭ	DANA COLY	8373 NW 12th Ave
X Add			MIAMI F/ 33150
Remove		1	
4) Change	5	DANA CODY	8373 NU 12th Ave
X \wedge \wedge \wedge			Miami F/. 33/50
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

		Articles, enter chang y). (Be specific)		(1)	
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an amendmer	nt provides for an i	exchange, reclassific amendment if not co	ation, or cancellati	on of issued : ndment itself	shares,
(if not appl	licable, indicate N/-	1)			
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The date of each amendment(s) add	ntion: 12-20-2018	, if other than the
date this document was signed.	prion.	
Effactive duta if applicable	11-29-2018	
enective date <u>n_appheable</u> :	11 - 29 - 2018 (no more than 90 days after amendment file da	ite)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirementariment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the accient for approval.	mendment(s)
☐ The amendment(s) was/were appromist be separately provided for e	oved by the shareholders through voting groups. The jollow ach voting group entitled to vote separately on the amenda.	ving statement ment(s)
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoption was not required.	ted by the board of directors without shareholder action and	d shareholder
The amendment(s) was/were adopaction was not required.	ted by the incorporators without shareholder action and sha	reholder
Dated $12 - 3$	W-2018	
Signature	ma & Caley	
(By a dir	ector, president or other officer – if directors or officers hav	
	by an incorporator – if in the hands of a receiver, trustee, of fiduciary by that fiduciary)	or other court
-	(Typed or printed name of person signing)	
	Paesivent	<u>. </u>
-	(Title of person signing)	