8/12/22, 10:48 AM

Division of Corporations

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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.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAXMY'S CARRIER SERVICES

Account Number : I20048000007 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: gail. laxmyscainer egmail. con

COR AMND/RESTATE/CORRECT OR O/D RESIGN NAUN TRANSPORT INC.

AUG 12 PK 4: 12

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J. HORNE

AUG 1 5 2022

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From: LAXMY CHACON

COVER LETTER

TO: Amendment Section Division of Corporation			·
NAME OF CORPOR	ATION: NAUN TRANSPO	RT INC	
DOCUMENT NUMB	D100000000110		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
I	KEYLER NAUN PEREIRA		
_		Name of Contact Person	n
2	NAUN TRANSPORT INC		
-		Firm/ Company	
1	14460 SW 114TH ST		
-		Address	
<u>;</u>	MIAMI, FL 33186		
		City/ State and Zip Cod	e
(GAIL.LAXMYSCAR RI ER@	GMAIL.COM	
-		sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
LAXMY CHACON		305	, 640-0281
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indirect Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415 I	Address Intent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

To:

8

Articles of Amendment to Articles of Incorporation of

FILED

2022 AUG 12 AH 11: 31

NAUN TRANSPORT INC	SECRETARY OF LANGE TABLEMANSSEE, FOR
(Name of Corporation as currently	filed with the Florida Dept. of State)
P18000020410	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I as Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
8. Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
7. F	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address: 	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
· · · · · · · · · · · · · · · · · · ·	City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Res	sistered Agent, if changing
heck if applicable	
The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

To:

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.

X Change	PT John	n Doe.		
X Remove	<u>V</u> <u>Mik</u>	<u>V</u> <u>Mike Jones</u>		
X Add	<u>SV</u> <u>Sall</u>	SV Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	-		- -	
Add				
Remove				
2) Change	VP	IRAIDA CRESPO TAVIO	15350 SW 236TH ST APT 301	
X Add			MIAMI FL 33196	
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5)Change				
Remove	·			
6) Change	•			
Add				
Remove				

From: LAXMY CHACON

To:

	08/11/2022	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:	/2022	
	(no more than 90 days after ame	ndment file date).
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory for partment of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of director	s without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of vote ficient for approval.	es cast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting group entitled to vote separately	ups. The following statement on the amendment(s):
"The number of votes cast i	or the amendment(s) was/were sufficient for	approval
by	(voting group)	
	(voting group)	
08/11/2022		
DatedSignature	Kaste	
(By a disselected	ector, president or other officer – if directors, by an incorporator – if in the hands of a recedification by that fiduciary)	or officers have not been siver, trustee, or other court
!	CYLER NAUN PEREIRA	
-	(Typed or printed name of person s	igning)
ì	PRESIDENT	
-	(Title of person signing)	