## P18000035819

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SECRETARY OF STATE TALL MHASSEE, FLORIDA

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JUN 13 2018

I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPO  | DRATION: ROAD RUNNER   | MAJESTIC CORP  |  |  |  |
|--|--|--|--|--|--|
| DOCUMENT NUM   | P18000035819   |  |  |  |  |
| The enclosed Article   | es of Amendment and fee are su                                 | bmitted for filing.  |  |  |  |
| Please return all corr                                       | espondence concerning this ma                                  | tter to the following:   |  |  |  |
|  | CLAUDIA POSADA   |  |  |  |  |
|  |  | Name of Contact Perso  | n  |  |  |
|  | ROAD RUNNER MAJESTIC CORP                                      |  |  |  |  |
|  | Firm/ Company  |  |  |  |  |
|  | 1300 W 47TH PL APT 218B  |  |  |  |  |
|  | Address  |  |  |  |  |
|  | HIALEAH FL 33012   |  |  |  |  |
|  |  | City/ State and Zip Coc  | le   |  |  |
| For further informati  | E-mail address: (to be used) on concerning this matter, please | sed for future annual report                                       | notification)  |  |  |
| CLAUDIA POSADA   |  | 305  | 728-9633  ode & Daytime Telephone Number  artment of State:                            |  |  |
| Name   | e of Contact Person  | Area Co  | ode & 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) |  |  |
| Mailing Address  Amendment Section  Division of Corporations |  | Street Address Amendment Section Division of Corporations          |  |  |  |
| P.O. Box 6327<br>Tallahassee, FL 32314                       |  | Clifton Building 2661 Executive Center Circle                      |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as cu  | arrently filed with the Florida Dept. of State)  |
|---|--|
| P18000035819  |  |
| (Document Nur   | mber of Corporation (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:                            | es, this Florida Profit Corporation adopts the following amendment(s) to   |
| A. If amending name, enter the new name of the corporati  | ion:   |
|   | The new  |
|   | poration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the ation "P.A." |
| B. Enter new principal office address, if applicable:   |  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   | SS = T1  |
|   |  |
|   |  |
| C. Enter new mailing address, if applicable:  |  |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> )  | <u></u> O  |
|   |  |
|   | 7  |
|   |  |
| D. If amending the registered agent and/or registered offic   |  |
| new registered agent and/or the new registered office a   | duress:  |
| Name of New Registered Agent  |  |
|   |  |
| (Flo  | rida street address)   |
| New Registered Office Address:  | Florida  |
|   | (City) (Zip Code)  |
|   |  |
| Non-Basistaned Assatis Cianatum if should Besiden d   | A A.   |
| New Registered Agent's Signature, if changing Registered<br>I hereby accept the appointment as registered agent. I am far |  |
|   |  |
|   |  |
|   |  |
| Signature of  | New Registered Agent, if changing  |

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>    | John Doe           |                         |  |
|-------------------------------|--------------|--------------------|-------------------------|--|
| X Remove                      | Y            | Mike Jones         |                         |  |
| X Add                         | <u>sv</u>    | Sally Smith        |                         |  |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>        | <u>Addres</u> s         |  |
| 1) Change                     | P            | YASMANI CASAS DIAZ | 1300 W 47TH PL APT 218B |  |
| Add X Remove                  |              |                    | HIALEAH FL 33012        |  |
| 2) Change                     | VP           | YASMANI CASAS DIAZ | 1300 W 47TH PL APT 218B |  |
| XAdd                          |              |                    | HIALEAH FL 33012        |  |
| Remove                        | P            | CLAUDIA POSADA     | 1300 W 47TH PL APT 218B |  |
| 3 ) Change X Add              | <u> </u>     |                    | HIALEAH FL 33012        |  |
| Remove                        |              |                    |                         |  |
| 4) Change                     |              |                    |                         |  |
| Add                           |              |                    |                         |  |
| Remove                        |              |                    |                         |  |
| 5) Change                     | _            |                    | -                       |  |
| Add                           |              |                    |                         |  |
| Remove                        |              |                    | <del></del>             |  |
| 6) Change                     |              |                    |                         |  |
| Add                           |              |                    | ·                       |  |
| Remove                        |              |                    |                         |  |

| If amending or adding additional Arti<br>Attach additional sheets, if necessary). | (Be specific)          |                   |  |          |   |
|---|------------------------|-------------------|--|----------|---|
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|   |                        |                   |  |          |   |
| f an amendment provides for an exch   | ange, reclassification | , or cancellation | of issued shares                             | <u>.</u> |   |
| provisions for implementing the ame   | idment if not contain  | ed in the amend   | ment itself:                                 |          |   |
| (if not applicable, indicate N/A)   |                        |                   |  |          |   |
|   |                        |                   | <u>.                                    </u> |          |   |
|   |                        | _                 |  |          |   |
|   |                        |                   |  |          |   |
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|   |                        |                   |  |          |   |
|   |                        |                   |  |          |   |

| •  | 04/17/2018  |                             |
|--|---|-----------------------------|
| The date of each amendment(s)  | idoption:   | , if other than the         |
| date this document was signed.   |   |                             |
|  | 17/2018   |                             |
| Effective date if applicable:  | (no more than 90 days after amendment file date)  |                             |
|  |   |                             |
| <b>Note:</b> If the date inserted in this document's effective date on the E | block does not meet the applicable statutory filing requirements, this date epartment of State's records.   | e will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )  |                             |
| The amendment(s) was/were ac<br>by the shareholders was/were s               | opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.  |                             |
|  | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):   | rt.                         |
|  | t for the amendment(s) was/were sufficient for approval   |                             |
| by   | (voting group)  |                             |
| -  | (voting group)  |                             |
| action was not required.   | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder  |                             |
| 06/07/201  | 8   |                             |
| Dated  | <u>/</u>  |                             |
| ·/   |   |                             |
| Signature  | torcie  |                             |
| (By a select   | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary) |                             |
|  | CLAUDIA POSADA  |                             |
|  | (Typed or printed name of person signing)   |                             |
|  | PRESIDENT   |                             |
|  | (Title of person signing)   |                             |