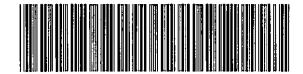
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| (Requestor's Name) | | | |
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| . , | | | |
| PICK-UP WAIT MAIL | | | |
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| (Business Entity Name) | | | |
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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
| - A 17" | | | |
| J. HORNE | | | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | DRATION: MB AUTO TRAN | SPORT INC | | | |
|--|---|--|--|--|--|
| | IBER: | | | | |
| The enclosed <i>Article</i> | s of Amendment and fee are su | bmitted for filing. | | | |
| Please return all corr | espondence concerning this ma | tter to the following: | | | |
| | MICHEL BENCOMO | | | | |
| | Name of Contact Person MB AUTO TRANSPORT INC | | | | |
| Firm/ Company | | | | | |
| | 5875 CURRY FORD RD | | | | |
| | | Address | | | |
| | ORLANDO FL 32822 | | | | |
| | | City/ State and Zip Code | 8 | | |
| | jcanal@aol.com | | | | |
| | E-mail address; (to be us | sed for future annual report | notification) | | |
| For further informati | on concerning this matter, pleas | se call: | | | |
| MICHEL BENCOMO | | 407 at (| 490-5234 | | |
| Name of Contact Person | | Area Code & Daytime Telephone Number | | | |
| Enclosed is a check f | or the following amount made | payable to the Florida Depa | irtment of State: | | |
| S35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | | Amend Divisio The C | Address Iment Section on of Corporations entre of Tallahassee | | |
| An Dir P.C | nendment Section vision of Corporations | Amend Divisio The C | lment Section on of Corporations | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

MB AUTO TRANSPORT INC

2021 NOV 16 AM 1:00

| (<u>Name</u> | of Corporation as curren | tly filed with the Florida Dept. of State PRE TARY OF 1.72. (ALL AHASSET, F) |
|--|---|---|
| P18000043035 | | Authorage Control |
| | (Document Number | of Corporation (if known) |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | .1006, Florida Statutes, thi | s Florida Profit Corporation adopts the following amendment(s) to |
| 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 "C "chartered," "professional association," | Corp," "Inc," or "Co". | "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word |
| | | 5875 CURRY FORD RD |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | ORLANDO FL 32822 |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 5875 CURRY FORD RD |
| | | ORLANDO FL 32822 |
| | | |
| | | |
| D. If amending the registered agent an new registered agent and/or the ne | nd/or registered office ad w registered office addre | dress in Florida, enter the name of the |
| _ | MICHAEL BENCOMO | |
| <u>Name of New Registered Agent</u> | 5875 CURRY FORD RE |) |
| | (Florida s | treet address) |
| New Registered Office Address: | ORLANDO | . Florida 32822 |
| | | (City) (Zip Code) |
| | | |
| New Registered Agent's Signature, if c | hanoino Revistered Aver | nt: |
| I hereby accept the appointment as regis | tered agent. I am familia | with and accept the obligations of the position. |
| | | |
| Licha | o l | |
| _ /~49/4 | Signature of New | Registered Agent, if changing |

Check 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) |
| | 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 Doc $\underline{\mathbf{V}}$ Mike Jones X Remove <u>SV</u> Sally Smith <u>X</u> Add <u>Addres</u>s Type of Action <u>Title</u> Name | (Check One) 5875 CURRY FORD RD MICHAEL BENCOMO 1) ____ Change $^{\rm X}$ $_$ Add ORLANDO FL 32822 ____ Remove 2) ____ Change ____ Add Remove 3) Change ____ Add ____ Remove 4) ____ Change ____ Add ____ Remove 51 ____ Change ____ Add Remove 6) ____ Change ____ Add

__ Remove

| Attach additional sheets, if necessary). | <u>cles, enter change(s) here</u> : (Be specific) |
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| If an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
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| provisions for implementing the amer (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares. Industrial not contained in the amendment itself: |

| | adoption: | , if other than |
|---|--|--------------------------------------|
| date this document was signed. | | |
| Effective date if applicable: | (no more than 90 days after amendment file date | |
| | (no more than 90 days after amendment file date | <u>')</u> |
| Note: If the date inserted in this document's effective date on the | s block does not meet the applicable statutory filing requirement Department of State's records. | nts, this date will not be listed as |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ■ The amendment(s) was/were action was not required. | adopted by the incorporators, or board of directors without sharel | nolder action and shareholder |
| ☐ The amendment(s) was/were a by the shareholders was/were | adopted by the shareholders. The number of votes east for the an sufficient for approval. | nendment(s) |
| ☐ The amendment(s) was/were a must be separately provided j | approved by the shareholders through voting groups. The follows for each voting group entitled to vote separately on the amendme | ing statement mt(s): |
| "The number of votes ca | ast for the amendment(s) was/were sufficient for approval | |
| by | ······································ | |
| , | (voting group) | |
| 10/08/20 Dated Signature | 21 | |
| (By a selection of the | director, president or other officer – if directors or officers have sted, by an incorporator – if in the hands of a receiver, trustee, or sinted fiduciary by that fiduciary) | |
| | MICHEL BENCOMO | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |

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