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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LIVED LIVES SH	IUTTLE, INC		
DOCUMENT NUM	D19000052240			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	TERESA HERNANDEZ			
		Name of Contact Persor)	-
	LIVED LIVES SHUTTLE, I	NC		
		Firm/ Company		-
	7330 W 15th CT	. ,		
		Address		-
	Hialcah, FL 33014			
		City/ State and Zip Code		- 23.
			,	-21 -21
erick	v62488@gmail.com		<u> </u>	دے ۱
	E-mail address: (to be us	sed for future annual report	notification)	==
For further information	on concerning this matter, pleas	se call:		2918 FEB - 11 A 10 %
Erick Valderrama		at (290-6776	φ.
Name	of Contact Person		de & Daytime Telephone Numbe	:r
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:	
S35 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		Street Address		
	endment Section	Amendment Section		
	vision of Corporations D. Box 6327		n of Corporations Building	
	lahassee, FL 32314		xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LIVED LIVES SHUTTLE, INC

P18000053269	ently filed with the Fl	orida Dept. of State		
	er of Corporation (if kn	own)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	·		ollowing ame	ndment(s)
A. If amending name, enter the new name of the corporation:	<u>.</u>			
LIVE LIFE TRANSPORT, INC			The	new
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or word "chartered," "professional association," or the abbreviatio	r "Co". A professioi		the abbrevi	ation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A			_
C. Enter new mailing address, if applicable:	N/A		r.a	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			- En	1
			-	3
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addr		er the name of the) . ;;	ز
Name of New Registered Agent V/A		<u> </u>		
(Florida	street address)			
		. Florida		
New Registered Office Address:		i ionua	(Zip Code)	

Signature of New Registered Agent, if changing

If amending the Officer's 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			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addre</u>	<u>s</u> s	
1) Change					
Add					
Remove					
2) Change					
Add				27	
Remove				<u> </u>	
3) Change				<u> </u>	
Add				<u> </u>	,
Remove				亞	, 447
				. දින	
4) Change					
Add Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
N/A			
		2	
	f	2519 1	3
	-	<u> </u>	-
		1 	1
	2	\triangleright	
		5	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	٠	20	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
N/A			
			· -

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	/22/2019	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date we Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	**	
.,	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
·		
01/22/20	·19	
Dated	· ·	2119
Simon 70	usa Demaiel.	
Signature / Z/	director, president or other officer – if directors or officers have not been	
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court	=
	inted fiduciary by that fiduciary)	1
	•	\triangleright $\dot{\imath}$
	TERESA HERNANDEZ	ب ر م. چ
	(Typed or printed name of person signing)	—————————————————————————————————————
	PRESIDENT	
	(Title of person signing)	