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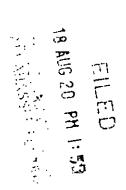
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## COVER LETTER

Division of Corporations NAME OF CORPORATION: F&A Transportion P18000053899 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FEA Transportion 5211 5W 4th street Miami, FL 33134 City/ State and Zip Code e yahoo. es be used for future annual report notification) For further information concerning this matter, please call: at (954) 549-9136

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filling Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

## **Mailing Address**

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314

## Street Address

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

## Articles of Amendment to Articles of Incorporation of

to

ERA TRANSPORTION CORP

	- 1 1 0 1 4 CO FC	<u> </u>		
(Name of Corporat	ion as currently filed with the	Florida Dept. of State)	 	
P181	000053898	ζ		
	ment Number of Corporation (if	known)		
Pursuant to the provisions of section 607.1006. Florid its Articles of Incorporation:	la Statutes, this <i>Florida Profit C</i>	Corporation adopts the fo	ollowing amend	ment(s)
A. If amending name, enter the new name of the c	orporation:			
FRA TRANSI		CORP	✓ The n	23147
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	rd "corporation," "company, o," "Inc," or "Co". A profess	" or "incorporated" or	the abbreviati	ion
B. Enter new principal office address, if applicable	<u></u>		<del>1</del> . <del>2</del> .	_
(Principal office address MUST BE A STREET AD.				
	·		· [5] [7]	- 777
		<del></del> _		- <del>113</del>
C. Enter new mailing address, if applicable:			22	Ö
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u> </u>		<del></del>	_
	<u></u>		3 S	_
	<del></del> -			-
D. If amending the registered agent and/or registered new registered agent and/or the new registered		enter the name of the		
Name of New Registered Agent				
	(Florida street address)			
	(Fromita siree) dataressy			
New Registered Office Address:	(City)	, Florida	(Zip Code)	-
	( =		, , ,	
New Registered Agent's Signature, if changing Re-	gistered Agent:			
I hereby accept the appointment as registered agent.	I am familiar with and accept	the obligations of the pos	sition.	
Sign	nature 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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		_	
Remove			
Kemove			
6) Change			
Add			
Remove			

	adding additional al sheets, if necessa	ry). (Be specif	ic)			
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f an amendme	nt provides for an	exchange, recla	ssification, or c	ancellation of is	sued shares.	
provisions for	implementing the	amendment if n	ot contained in	the amendment	itself:	
(if not app	licable, indicate N/.	4)				
						•
		<u> </u>				
<u> </u>						
<u>.                                    </u>						

The date of each amendment(s) ad date this document was signed.	option:, if other	than
Effective date if applicable:	06-15-2018	
	06-15-2018 (no more than 90 days after amendment file date)	
Note: If the date inserted in this bl	ock does not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.	ed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	sted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	
DatedQ	7-29-2018	
Signature	Kalomina	
	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
<u>-</u>	Frank Palamino	
	(Typed or printed name of person signing)	
_	President	
-	(Title of person signing)	

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