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(Document Number)	—
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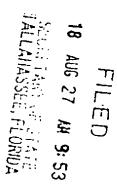
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AUG 2 9 2018 S. YOUNG



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	A B Bernal Transport Inc
DOCUMENT NUMBER:	18000055608
The enclosed Articles of Amendment ar	nd fee are submitted for filing.
Please return all correspondence concert	ning this matter to the following:
	Alfrado Bernal
	Alfredo Bernal Name of Contact Person
	Firm/ Company
55	SI SW 135TH AVE APT B117 Address
	broke Pines FL 33027 City/ State and Zip Code
	City/ State and Zip Code
<u>U</u> /fredo E-mail addre	ss: (to be used for future annual report notification)
For further information concerning this n	natter, please call:
Alfredo Bernal	at ( <u>305</u> ) <u>340 - 7922</u> Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following am	ount made payable to the Florida Department of State:
\$35 Filing Fee	
Mailing Address Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation

of

A # Bernal Transpo	ort Inc			
(Name of Corporation	n as currently filed with	h the Florida Dept. of <u>State</u> )		
P 18000055608				
(Docume	nt Number of Corporation	on (if known)		
Pursuant to the provisions of section 607,1006. Florida Sits Articles of Incorporation:	Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the fo	llowing amendn	nent(s) to
A. If amending name, enter the new name of the corp	poration:			
A Bernal Transport IN name must be distinguishable and contain the word	C		The ne	'M'
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the al	"Inc," or "Co". A pr	any," or "incorporated" or rofessional corporation name	the abbreviation must contain the	on he
B. Enter new principal office address, if applicable:				
(Principal office address MUST BE A STREET ADDR	RESS )		F- 12 00	
			AUG	FIL
C. Enter new mailing address, if applicable:			SEE T	m
(Mailing address MAY BE A POST OFFICE BOX	<u></u>		-n -=	J
			် (၁) မှာ	
			D <sub>2</sub> 53	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ida, enter the name of the		
Name of New Registered Agent		_		
-	(Florida street address)			
New Registered Office Address:		, Florida		
New Registered Office Address,	(Ciţy)	, Figurda	(Zip Code)	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I de-	tered Agent:	cent the abligations of the nas	ition	
тистем иссерстве суронитени актединетой адет. То	am jammar man ana ac	cept the oraginous of the pos	****///	
Signat	ure of New Registered 4	oent 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	$\underline{\mathbf{p}}\underline{\mathbf{r}}$	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change				
Add		_		<del></del>
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an exch provisions for implementing the ame	nange, reclassificati	ion, or cancellation ained in the amen	<u>n of issued shares</u> dment itself:	<b>a</b>
(if not applicable, indicate N/A)			<del></del>	
-	<del></del>		<u>-</u>	<del></del>
			<u>-</u>	

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Alfredo Bernal (By a director, president or other officer – if directors or officers have not been	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Alfrecto Berival (Typed or printed name of person signing)	
Incorporator (Title of person signing)	
(Title of person signing)	

. . . .