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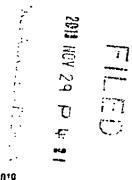
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: _____ DOCUMENT NUMBER: P18000070017 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jandrea Lee Name of Contact Person JTL Transportation Firm/ Company 6705 CR 559 Address Bushnell, FL 33513 City/ State and Zip Code John@JTLTransport.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 222-9199

Area Code & Daytime Telephone Number John Lee Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address

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

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

Articles of Amendment

Articles of Incorporation of

JTL Transportation	FIF:
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
P18000070017	2019 HOU OO TO L ~
(Document Number of Corporation (if kno	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> its Articles of Incorporation:	poration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "company," or "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profession word "chartered," "professional association," or the abbreviation "P.A."	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, ent- new registered agent and/or the new registered office address:	er the name of the
Name of New Registered Agent	
Florida street address)	
New Registered Office Address: (City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the	obligations of the position.
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: XChange	<u>PT</u>	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			
I) X Change	VP	Jandrea Lee	6705 CR 559			
Add			Bushnell, FL 33513			
Remove						
2) Change	P	John Lee	6705 CR 559			
X Add			Bushnell, FL 33513			
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove			-			
6) Change						
Add						
Remove						

ending or adding add h additional sheets, if r	ecessary). (Be spe	cific)		
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amendment provides isions for implementi	ng the amendment i	f not contained in	the amendment it	self:
(if not applicable, indi	rate N/A)			
	,			
<u> </u>				
	7			

11/26/18	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
11/26/148 .	
Effective date if applicable: to more than 90 days after amendment file date	?)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	its, this date will 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 am by the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The followinust be separately provided for each voting group entitled to vote separately on the amendment.	
"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 action was not required.	shareholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	cholder
Dated	
Signature (By a director, president or other officer – if directors or officers have	a not hour
selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Jandrea Lee	
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	