P18000072515

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: BROTHERS MAK	RTIN GRAU TRANSPORT	T INC	
DOCUMENT NU	010000073515			
The enclosed Artic	cles of Amendment and fee are su	bmitted for filing.		
Please return all co	orrespondence concerning this ma	itter to the following:		
	ELENNY Y RECARTE RAI	UDALES		
		Name of Contact Person	n	
	BROTHERS MARTIN BRA	U TRANSPORT INC		
		Firm/ Company	2-9-9-1	
	6026 DEEPWOOD CT			
		Address		
	JACKSONVILLE, FL 32244	l .		
		City/ State and Zip Code	c	
	bmgtransportine@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further inform	ation concerning this matter, pleas	se call:		
ELENNY Y REC	ARTE RAUDALES	at (<u>850</u>	454-4100	
Nai	ne of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check	k for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	S43.75 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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BROTHERS MARTIN GRAU TRANSPORT INC

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DROTHERS MARTIN GRAU TRANS	PORTING	The same of the sa	
(Name	of Corporation as currer	ntly filed with the Florida Dept. of State)	
P18000072515		2023 ГЕВ - 4 " РН 3: ;	23
Pursuant to the provisions of section 607 its Articles of Incorporation:		of Corporation (if known) TALL AHASSEE, FL	TE amendment(s) to
	6.1		
A. If amending name, enter the new n	ame of the corporation:		
	Corp." "Inc." or "Co".	"company," or "incorporated" or the abbreviation A professional corporation name must contain	
B. Enter new principal office address,		7029 WAIKIKI RD	
(Principal office address <u>MUST BE A S</u>		JACKSONVILLE FL 32216	
C. Enter new mailing address, if applicable:		7029 WAIKIKI RD	
(Mailing address <u>MAY BE A POST</u>	(Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent an new registered agent and/or the ne	w registered office addre	<u>ss:</u>	
Name of New Registered Agent	ELENNY Y RECARTE	RAUDALES	
	7029 WAIKIKI RD		
	(Florida s	trect address)	
New Registered Office Address:	JACKSONVILLE	Florida 32216	
A Registered Cypies Madress.		(City) (Zip Co	:de)
	tered agent. I am familiar	nt: r with and accept the obligations of the position. Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed p			

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; CE() = Chief Executive Officer; CF() = 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> <u>J</u>	John Doe	
X Remove	<u>V</u> .	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	IVAN R MARTIN	6026 DEEPWOOD CT
Add			JACKSONVILLE FL 32244
X Remove			
2) X Change	P	ELENNY Y RECARTE RAUDALE!	7029 WAIKIKI RD
Add			JACKSONVILLE FL 32216
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

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in amendment provides f	<u>for an exchange, reclas</u>	sification, or cancel	<u>lation of issued sha</u>	ares,	
ovisions for implementing (if not applicable, indicable, indicable	ng the amendment if no	ot contained in the a	mendment itself:		
(у погарунскияе, таки	ute 1974)				
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The date of each amendment(s) adoption:date this document was signed.	. if other than the
(no more than 90 days	after amendment file date)
Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of action was not required.	f directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numb by the shareholders was/were sufficient for approval.	er of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vomust be separately provided for each voting group entitled to vote se	
"The number of votes cast for the amendment(s) was/were suffi	
by	
(voting group)	
Dated D1/24/2025 Signature Elenny R.	
Signature Elenny R.	
Signature Elenny K. (By a director, president or other officer – if selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	directors or officers have not been of a receiver, trustee, or other court
ELENNY Y RECARTE RAUDALE	S
(Typed or printed name o	f person signing)
P	
(Title of person signing)	