## P18000076097

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## **COVER LETTER**

TO: Amendment Section Division of Corporations PRIMETIME AUTO TRANSPORTS INC NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KHALIL POWELL Name of Contact Person PRIMETIME AUTO TRANSPORTS INC Firm/ Company 6022 SW 23RD ST Address MIRAMAR FL. 33023 City/ State and Zip Code A2CONSULTACCT@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 954 ) 854-1811

Area Code & Daytime Telephone Number KHALIL POWELL Name of Contact Person 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 Filing Fee

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Mailing Address

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

Certificate of Status

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroc Street, Suite 810
Tallahassee, FL 32303

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## Articles of Amendment Articles of Incorporation of

## PRIMETIME AUTO TRANSPORTS INC.

(Name of Corporati	ion as currently filed with the Florida Dept. of State)
P18000076097	
(Docur	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:
nama must be distinguished and contain the word "o	The new corporation," "company," or "incorporated" or the abbreviation "Corp.,"
	" or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable	
(Principal office address <u>MUST BE A STREET ADI</u>	<u>DRESS</u> )
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u>)X</u> )
D. If amonding the registered egent and/or register	and office address in Florida, anton the name of the
new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
N. B. J. J. W. St. J. B.	
New Registered Agent's Signature, if changing Reg	Pistered Agent:  I am familiar with and accept the obligations of the position.
, , , , ,	ζ,
Signo	ature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	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	VP	KRYSTAL POWELL	6022 SW 23RD ST
Add X Remove			MIRAMAR FL. 33023
2) Change	VP	KHAMAL POWELL	2140 SHERMAN ST
X Add			APT 204
Remove 3) Change		_	MIRAMAR FL. 33025
Add			
Remove			<del>.</del>
4) Change			
Add			
Remove			
5) Change	·		
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary	). (Be specific)	<u>ge(s) here</u> :		
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an amendment provides for an excovisions for implementing the a	<u>change, reclassifica</u>	ation, or cancellat	ion of issued shar	res,
(if not applicable, indicate N/A)			VII COLL	
		<del></del>		
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				<del></del>
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The date of each amendment date this document was signed.	(s) adoption:	, if other than
Effective date if applicable:	JULY 15TH, 2020	
	(no more than 90 days after amendment file da	ite)
	his block does not meet the applicable statutory filing requirement Department of State's records.	ents, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the are sufficient for approval.	amendment(s)
	e approved by the shareholders through voting groups. The follow If for each voting group entitled to vote separately on the amendm	-
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
Dated	07/16/20	
Signature	Se-	
(By sel	a director, president or other officer – if directors or officers have ected, by an incorporator – if in the hands of a receiver, trustee, o pointed fiduciary by that fiduciary)	
	KHALIL POWELL Khalil	Pavell.
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	····

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