PRODUBBA

(Requestor's Name)			
(Address)			
(Address)			
(1001033)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, ,			
(Danwarah Number)			
(Document Number)			
Certified Copies Certificates of Status			
Consider the Siling Officer			
Special Instructions to Filing Officer:			

Office Use Only



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10/04/18--01014--018 **52.50

FILED

18 OCT 29 PH 2:51

SECRETARSSEE, FLORIDA

TALLAHASSEE, FLORIDA

OCT 3 0 2018 S. YOUNG



October 17, 2018

IXAMAR MONTALVAN 426 SW 14 AVENUE MIAMI, FL 33135

SUBJECT: AAILAYAH'S TRANSPORTATION CORP

Ref. Number: P18000080802

We have received your document for AAILAYAH'S TRANSPORTATION CORP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Sheba H-Young Regilatory Specialist II

Letter Number: 518A00021233

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AAILAS	JAHS Transportation CUBP				
DOCUMENT NUMBER: P180000 80802					
The enclosed Articles of Amendment and fee are sul	omitted for filing.				
Please return all correspondence concerning this mat	ter to the following:				
Ixamar	Montanco Name of Contact Person				
.	Firm/ Company				
426 50	w. 14 ave				
	426 Sw 14 CNC Address				
- Migmi:	MIGMI, FL 33135 City/ State and Zip Code				
	City/ State and Zip Code				
T					
E-mail address: (to be us	ed for future annual report notification)				
is man address. (to be us	to ratare annual report normeation)				
For further information concerning this matter, please	e call:				
Ixamar Montalvan	at (386) 519 - 6575 Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made p					
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address	Street Address				
Amendment Section	Amendment Section				
Division of Corporations P.O. Box 6327	Division of Corporations				
Tallahassee, FL 32314	Clifton Building				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

HAILAYAHS Train	-xontonox-	COCP		
·	oration as currently	filed with the Flo	rida Dept. of State)	
P180	00080802	<u>-</u>		
(E	Document Number of C	Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	Torida Statutes, this Fi	orida Profit Corp	oration adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of t	the corporation:			
Paliyah's Trucking Coname must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," of	word "corporation, Corp," "Inc," or "Co	o". A profession	"incorporated" or al corporation name	The new the abbreviation must contain the
B. Enter new principal office address, if appli	cable:		NIA	
(Principal office address <u>MUST BE A STREET</u>	'ADDRESS')		•	_
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC.) D. If amending the registered agent and/or renew registered agent and/or the new regist 	gistered office addres	s in Florida, ente	N A	PILED PH 2: 51 ALLAHASSEE, FLORIDA
	ered office address:			
Name of New Registered Agent	.	NA		
	(Florida stree	address)		
New Registered Office Address:		ityy	, Florida	(Zip Code)
New Registered Agent's Signature, if changing thereby accept the appointment as registered agent		h and accept the a	obligations of the po	sition.
	Signature of New Res	uistored Agent if i	·hanaina	

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	PT	John Doe	
X Remove	<u>y</u> .	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add		_	
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
S. Char			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	
	
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f an amendment provides for an eych provisions for implementing the ame	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	10	17/18	, if other than the
date this document was signed.		1 6	
Effective date if applicable:	10/23	118	nendment file date)
	(no more th	han 90 days after ar	nendment file date)
Note: If the date inserted in this block does document's effective date on the Department o			filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		. The number of vo	tes cast for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	ne shareholder g group entitle	s through voting gro ed to vote separatel	oups. The following statement y on the amendment(s):
"The number of votes cast for the ame	endment(s) was	s/were sufficient for	r approval
by	<u>-</u>		"
(ve	ting group)		
☐ The amendment(s) was/were adopted by the action was not required.	board of dire	ctors without sharel	holder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators	s without sharehold	er action and shareholder
Dated			
	orporator – if	in the hands of a re	rs or officers have not been ceiver, trustee, or other court
•••	Examar	nted name of person	Jav
	(Typed or pri	nted name of perso	n signing)
		President	
	(1	litle of person signi	ing)

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