## P18000083005

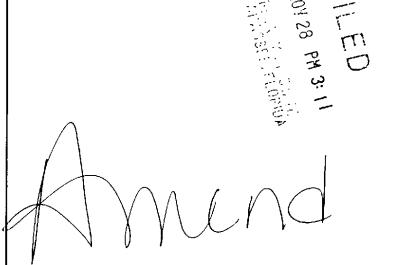
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Radeon Transport	Inc	
DOCUMENT NUM	BER: P18000083005		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Jonathan Cruz		
		Name of Contact Person	n
	Radeon Transport Inc		
		Firm/ Company	
	827 Buccaneer Blvd		
		Address	
	Winter Haven, FL 33880		
	<del> </del>	City/ State and Zip Cod	ť
rada	ontransportinc@gmail.com		
	• • •	sed for future annual report	notification)
	E-man address, (10 be d.	sed for fattire armital report	TRACTICALION)
For further information	on concerning this matter, pleas	se call:	
Jonathan Cruz		863 at (	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fi	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□S43.75 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle
	The second section of the second section is		issee, FL 32301

## Articles of Amendment

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Articles of Incorporation of 20/8 HOV 28 PH 3: // Radeon Transport Inc P18000083005 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." 2935 West Oak Ridge Rd B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Orlando, FL 32809 C. Enter new mailing address, if applicable: 2935 West Oak Ridge Rd (Mailing address MAY BE A POST OFFICE BOX) Orlando, FL 32809 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Hector Bienvenido Peralta Name of New Registered Agent 2935 West Oak Ridge Rd (Florida street address) Orlando New Registered Office Address: (Citvi 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.

X Change	<u>pT</u>	John Do	<u>oe</u>			
X Remove	<u>V</u>	Mike Jo	ones			
X Add	<u>sv</u>	<u>Sally St</u>	mith			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	11 /2	<u>Addres</u> s	
1) Change		_		MA		
Add				1		
Remove						
2) Change	-	_				
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f amending or adding addit attach additional sheets, if no	cessary). (Be spe	ccific)		
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	# I		•	
an amendment provides fo	r an exchange, res	classification, or cane	ellation of issued st	ures.
rovisions for implementing	the amendment i	f not contained in the	amendment itself:	<del></del>
(if not applicable, indica	e N/A)			
<del></del>				
		/V / /		
		///		
			·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 red document's effective date on the Department of State's records.	quirements, 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 east for by the shareholders was/were sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the a	
"The number of votes cast for the amendment(s) was/were sufficient for approva	1
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder act action was not required.	ion and shareholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder
Dated	
Signature	
(By a director, president or other officer – if directors or office selected by an incorporator – if in the hands of a receiver, tru appointed fiduciary by that fiduciary)	
Jonathan Cruz	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	