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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	GABRIEL & ODA	RIS TRANSPORT INC				
	000084505					
The enclosed Articles of Amendo	ment and fee are sub	omitted for filing.				
Please return all correspondence	concerning this mat	ter to the following:				
ODARIS	ROMERO					
	Name of Contact Person					
Firm/ Company						
8414 REC	SPRUCE AVE					
	Address					
RIVERVI	EW, FL 33578					
		City/ State and Zip Code				
DCMOLINAOF	RTEGA@GMAIL.C	COM				
E-ma	il address: (to be use	ed for future annual report	notification)			
For further information concerning	ng this matter, please	e call:				
ODARIS ROMERO		at ( <u>813</u>	389-9051 de & Daytime Telephone Number			
Name of Contact	Name of Contact Person Area Code & Daytime Telephone Numb					
Enclosed is a check for the follow	ving amount made p	ayable to the Florida Depa	rtment of State:			
	1.75 Filing Fee & tificate 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, Ft. 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

GABRIEL & ODARIS TRANSPORT INC

2018 NOY -2 PM 12: 25

(Name of Corporation as current	ly filed with the FloridalDept. of State) 1812
P18000084505	
(Document Number o	of Corporation (if known)
	·
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
GRCI TRANSPORT INC	The new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' ord "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	N/A
Principal office address MUST BE A STREET ADDRESS)	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	<u>s:</u>
new registered agent and/or the new registered office address  N/A  Name of New Registered Agent	<u>5:</u>
Ν/Δ	<u>s:</u>
Name of New Registered Agent N/A	reet address)
Name of New Registered Agent N/A	

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>	<u>John De</u>	n <u>e</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	D	_	CARLOS LOPEZ	418 KENSINGTON LAKE CIRCL
X Add				BRANDON, FL 33511
Remove				
2) Change		_	<del> </del>	
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
3 ) Change		<del></del>		
Add				
Remove				
4) Change		_		
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Remove				
5) Change	<u></u>			
Add				
Remove				
6) Change		_		
Add				
Pernave				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
N/A			
IN/A			
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)			
N/A			
<del> </del>			

	10/26/2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	0.000.00	
Effective date <u>if applicable</u> :	0/26/2018	
mappineasie.	(no more than 90 days after amendment file date)	···-
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this of Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	l(s)
The amendment(s) was/were a must be separately provided j	pproved by the shareholders through voting groups. The following statem or each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and sharehold	der
action was not required.	dopted by the incorporators without shareholder action and shareholder	
10/26/20	18	
DatedSignature		
	director, president or other officer of directors or officers have not beer	
selec	ted/by an incorporator – if in the hands of a receiver, trustee, or other countried fiduciary by that fiduciary)	art
аррс		
	Odaris Homero	
	(Typed or printed name of person signing)	
	President	·····
	(Title of person signing)	<del></del>

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