P19000007125

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(Requestor's Name)

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(Address)

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(Address)

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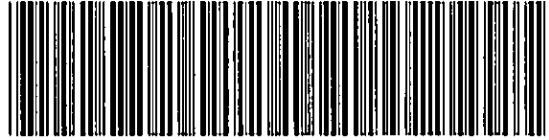(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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R. WHITE

JAN 0 6 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2019

JOSEPH MORGADO SR
1552 SE NIEMEYER CIR
PORT SAINT LUCIE, FL 34984

SUBJECT: PSL TRANSPORTATION INC
Ref. Number: P19000007125

We have received your document for PSL TRANSPORTATION INC and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

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.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 219A00021062

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: _PSL Transportation Inc_

DOCUMENT NUMBER: _P19000007125_

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Morgado SR
Name of Contact Person

PSL Transportation Inc
Firm/ Company

706 South 5th Street
Address

Fort Pierce FL 34950
City/ State and Zip Code

interstatebcca@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Morgado SR at (_561_, _251 7767_
Name of Contact Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ S35 Filing Fee   ☐ S43.75 Filing Fee &   ☐ S43.75 Filing Fee &   ☐ S52.50 Filing Fee
                         Certificate of Status   Certified Copy   Certificate of Status
                                                      (Additional copy is   Certified Copy
                                                      enclosed)   (Additional Copy
                                                                                  is enclosed)

Mailing Address   **Street Address**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
P.O. Box 6327   The Centre of Tallahassee
Tallahassee, FL 32314   2415 N. Monroe Street, Suite 810
                                        Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

PSL Transportation Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000007125

(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:

_____*The new 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."*

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

PSL Transportation Inc
706 South 5th Street
Ft Pierce FL 34950

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

PSL Transportation Inc
706 South 5th Street
Ft Pierce FL 34950

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:
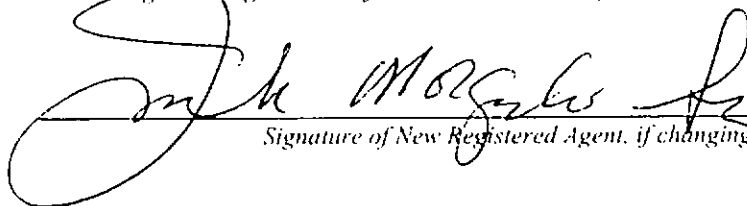
Name of New Registered Agent Joseph Morgado SR.

706 South 5th Street
(Florida street address)

New Registered Office Address: Ft Pierce _____, Florida 34950
(City) *(Zip Code)*

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

Page 1 of 4

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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ___ Add X Remove	P	Joseph Morgado JR	1921 SW Biltmore St Port Saint Lucie FL 34984
2) ___ Change ___ Add ___ Remove			
3) ___ Change ___ Add ___ Remove			
4) ___ Change ___ Add ___ Remove			
5) ___ Change ___ Add ___ Remove			
6) ___ Change ___ Add ___ Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary).   *(Be specific)*

_____

_____

_____

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_____

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)

_____

_____

_____

_____

_____

_____

_____

_____

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 requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)   (**CHECK ONE**)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
                         (voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☑ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated _____12/24/19_____

Signature _____

(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)

_____Joseph Morgado SR_____
(Typed or printed name of person signing)

_____President_____
(Title of person signing)