P19000012885

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: American Freight	Transport Advisors CO		
DOCUMENT NUMBI				
	f Amendment and fee are su	ibmitted for filing.		
Please return all corresp	ondence concerning this ma	itter to the following:		
(Oscar R. Fernandez			
_		Name of Contact Pe	erson	
ŕ	American Freight Transport	Advisors CO		
_		Firm/ Company	•	
9	9559 SW 165 CT			
		Address		
N	Miami, FL 33196			
_	·-	City/ State and Zip (Code	
oscar@	aftaco.com			
	E-mail address: (to be us	sed for future annual rep	port notification)	
For further information	concerning this matter, pleas	se call:		
Oscar R. Fernandez		786 at (488-9383	
Name of	Contact Person	Area	Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida D	Department of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certificate of Status	
	ng Address		eet Address	
	dment Section		nendment Section	
	on of Corporations		rision of Corporations	
	30x 6327 nassee, FL 32314		fton Building 51 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

American Freight Transport Advisors CO

(Name)	of Corporation as currently filed	with the Florida Dept. of State)
19000012885		
-	(Document Number of Corpo	oration (if known)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this <i>Florida</i>	a Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
	N/A	The new
	ation "Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation A professional corporation name must contain the
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>		N/A
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		NIA
	<u></u>	SECNE A
 If amending the registered agent an new registered agent and/or the nev 		Florida, enter the name of the
Name of New Registered Agent	Oscar R. Ferenandez	S S E
	9559 SW 165 CT	—————————————————————————————————————
	(Florida street addr	
N D 1 1000 111	Miami	, Florida 33196
New Registered Office Address:		, i fortua

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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.

Example: X_Change	<u>PT</u>	John Doe	
X Remove	Y	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	PTS	Oscar Fernandez	9559 SW 165 CT
Add			Miami, FL 33196
X Remove			
2) Change	PTS	Oscar R. Fernandez	9559 SW 165 CT
X Add			Miami, FL 33196
Remove			
3) Change		_	
Add			
Remove			
4) Change		_	
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change		_	
Add			
Remove			
			•
6) Change			
Add			
Remove			

	eets, if necessary).				
		N/a			
					
					
				•	
			·		
<u>f an amendment pi</u> provisions for imp	ovides for an excha- ementing the amend	<u>nge, reclassificati</u> dment if not cont:	<u>on, or cancellati</u> sined in the sme	<u>on of issued share</u> ndment itself:	<u>S.</u>
(if not applicab	le, indicate N/A)				
		NA			
		<u>~ / - </u>			
					-

The date of each amendment(s) adop	etion:	, if other than the
date this document was signed.		
Effective date if applicable:	5/28/2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this tment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendmentient for approval.	u(s)
	ved by the shareholders through voting groups. The following state ch voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder	
Dated 5/2	1/2019	
Signature	1/2019 	
	etor, president or other officer – if directors or officers have not bee	<u></u>
	by an incorporator – if in the hands of a receiver, trustee, or other co	
	fiduciary by that fiduciary)	
	OSCAR R. FLANANDEN	
_	(Typed or printed name of person signing)	
	P/T/S	
_	(Title of person signing)	