To:

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : USA CORPORATE SERVICES GROUP

Account Number : I20150000041 Phone : (954)303-2957

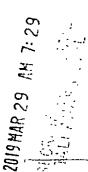
Fax Number : (888)757-7949

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

3

COR AMND/RESTATE/CORRECT OR O/D RESIGN ALL CARS TRANSPORTED INC.



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Help

Articles of Amendment to Articles of Incorporation of

To:

ALL CARS TRANSPORTED INC.			
(Name of Corporati	on as currently filed with the	Florida Dept. of State)	
P19000015091			
(Досшт	nent Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Floridalits Articles of Incorporation:	a Statutes, this <i>Florida Profit C</i>	Corporation adopts the follow	ring amendment(s)
A. If amending name, enter the new name of the co	rporation:		
			The new
name must be distinguishable and contain the wor. "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	," "Inc," or "Co". A profess		abbreviation
B. Enter new principal office address, if applicable			
(Principal office address MUST BE A STREET ADD	DRESS)	_ •	
			至 5 工
			
C. Enter new mailing address, if applicable:	37.		
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		
			
			<u> </u>
D. If amending the registered agent and/or register	red office address in Florida.	enter the name of the	
new registered agent and/or the new registered			
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
HEN HERMEIER OFFICE AGAR ESS.	(City)		p Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent; I am familiar with and accept t	the obligations of the position	1.
	ature of New Registered Agent.	:C-1	
Sien	auure ot New Kegisterea Agent.	u cnanging	

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:

To:

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 Doe	!	
X Remove	<u>V</u>	Mike Jon	<u>us</u>	
_X Add	<u>sv</u>	Sally Smi	<u>ith</u>	
Type of Action (Check One)	Title]	Nume	Address
I)Change			COOPER, JERRY	
Add				
X Remove				
2) Change		····		
Add				
Remove				
3) Change			· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
() Change				
6)Change				
Add				
Remove				

	dding additional Art l sheets, if necessary).	(Be specific)	<u></u>		
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If an amendmen	nnlementing the ume	months in nor collection	med in the Amendi	ment itsen.	
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USA Corporate Service Fax: 18887577949	To:	Fax: (850) 617-6380	Page: 5 of 5	03/28/2019 11:51 PM
The dute of each amendment(s) ado date this document was signed.	ption:			, if other than the
Effective date <u>if applicable</u> :				
	(no m	ore than 90 days after amendment file	: date)	
Note: If the date inserted in this blo document's effective date on the Department.			ements, this date w	ill not be listed as the
Adoption of Amendment(s)	(CHECK C	<u>ONE</u>)		
The amendment(s) was/were adopt by the shareholders was/were suffi			e amendment(s)	
☐ The amendment(s) was/were appromist be separately provided for ea		olders through voting groups. The for entitled to vote separately on the amer		
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval		
by		,,,		
	(voting gro	шр)		
The amendment(s) was/were adopt action was not required.	ed by the board o	f directors without shareholder action	and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorpor	rators without shareholder action and	shareholder	
3/20/2019				
Dated	-0 A 1 A -			
Signature		*		
(By a dire selected,	ctor, president or	other officer – if directors or officers r – if in the hands of a receiver, trusted fiduciary)		

Nelson Medina

Incorporator

From:

(Typed or printed name of person signing)

(Title of person signing)