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CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK	UP:	11/18 Glinda		
	CERTIFIED COPY			_	
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•	KALEN TRANSPORT INC				
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PECIA	L INSTRUCTIONS:				

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: KALEN TRANSP	ORT INC	
DOCUMENT NUMBER: P19000071379		·····
The enclosed Articles of Amendment and fee are su	ibmitted for filing.	
Please return all correspondence concerning this ma	itter to the following:	
MARLEN OLIVA		
	Name of Contact Person	
KALEN TRANSPORT INC		
	F: 10	
210 DEL MONTELIN	Firm/ Company	
318 BELMONT LN		
	Address	_
KEY LARGO, FL.33037		
	City/ State and Zip Code	·
1: 40204C		
moliva40304@gmail.com		
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
MARLEN OLIVA	at (³⁰⁵	801-7440
Name of Contact Person		le & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depar	rtment of State:
S35 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	Division Clifton I	nent Section of Corporations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Corporation as curre	ntly filed with the Florida Dept. of	State)	- 	
(Document Number	of Corporation (if known)			, = 1
06, Florida Statutes, th	is Florida Profit Corporation adopt	s the follow	ving ame	ndment(s)
e of the corporation:				
			Tha	new
ion "Corp," "Inc," or n," or the abbreviation	"Co". A professional corporation	ed" or the 1 name mu	abbrevi	ation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			2019	_
	KEY LARGO, FL. 33037	, -	KOY	
hle			9	
FICE BOX)			<u> </u>	
	318 BELMONT LN		ا ا	·
	KEY LARGO, FL. 33037		ü	
or registered office ad egistered office addre	dress in Florida, enter the name of ss:	<u>[the </u>		
ARLEN OLIVA				
0.001.101.001				
8 BELMONT LN				
	treet address)			
	,	33037		
	e of the corporation: In the word "corporation" In the word "corporation" In Corp," "Inc," or In," or the abbreviation In applicable: EET ADDRESS Die: FICE BOX Or registered office addre	e of the corporation: In the word "corporation," "company," or "incorporate for "Corp," "Inc," or "Co". A professional corporation in," or the abbreviation "P.A." Applicable: EET ADDRESS) 318 BELMONT LN KEY LARGO, FL. 33037 DIE: FICE BOX) 318 BELMONT LN KEY LARGO, FL. 33037 Or registered office address in Florida, enter the name of egistered office address:	e of the corporation: In the word "corporation," "company," or "incorporated" or the fon "Corp," "Inc," or "Co". A professional corporation name musta," or the abbreviation "P.A." Applicable: EET ADDRESS) 318 BELMONT LN KEY LARGO, FL. 33037 Description: KEY LARGO, FL. 33037 Description: KEY LARGO, FL. 33037 Description: The registered office address in Florida, enter the name of the egistered office address:	06, Florida Statutes, this Florida Profit Corporation adopts the following ame e of the corporation: The in the word "corporation," "company," or "incorporated" or the abbrevi ion "Corp," "Inc," or "Co". A professional corporation name must contain," or the abbreviation "P.A." applicable: EET ADDRESS 318 BELMONT LN KEY LARGO, FL. 33037 Solite: FICE BOX 318 BELMONT LN EXECUTATION SOLITION SOLITI

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Khange	R	marlen Oliva	318 belmont LN
Add			Key Largo FL 3303
Remove			
2) Change			
Add			
Remove			
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
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f an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
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provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s) a	loption:	, if other tha
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 be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed a
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment flicient for approval.	nt(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated//	18/19	
Signature		
(By a all	rector, president or other officer - if directors or officers have not bee	n
appoint	, by an incorporator – if in the hands of a receiver, trustee, or other coed fiduciary by that fiduciary)	urt
	Harlan Oliva	
	(Typed or printed name of person signing)	
_	Ines	
	(Title of person signing)	