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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : I20140000047 Phone : (813)774-4726

Fax Number : (813)877-2186

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

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COR AMND/RESTATE/CORRECT OR O/D RESIGN JJEJ TRANSPORT INC

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S. YOUNG

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Help

TO: Amendment Section

COVER LETTER

Division of Corpo	erations		
NAME OF CORPOR	EATION: JJEJ TRANSPORT	T INC	
DOCUMENTINUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JUAN JOSE ESPINOSÁ JÍN	MENEZ	
		Name of Contact Person	ni
	JJEJ TRANSPORT INC		
		Firm/ Company	
	7006 N OREGON AVE		
		Address	
	TAMPA: FL 33604	•	
		City/ State and Zip Cod	E
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For further information	concerning this matter, plea-	se call:	
JUAN JOSE ESPÎNO	SA ĴIMEÑEZ	at (813	3150734
Name of Contact Person		Area Co	3150734 de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
∑ S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	S52:50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment Articles of Incorporation of

JEJ TRANSPORT INC		
(Name of Corporation as co	rrently filed with the Florida Dept. of State)	
P19000077718		
(Document Nu	mber of Carporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the fol	lowing amendment(s) to
A. If amending name, enter the new name of the corporat	ion:	
		The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.,;" or the designation "Corp," "Inc," or "Chartered," "professional association," or the abbreviation	Co.: A professional corporation name must o	iviation "Corpi." iontain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	,	- 2/1 5
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	·	
		<u> </u>
D. If amending the registered ugent and/or registered offi	the address in Physical actor the name of the	DA T
new registered agent and/or the new registered office a		
Name of New Registered Agent		
(Fic	orida štreet address)	
New Registered Office Address:	. Florida	
ment in the state of the state	(Gip)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. Lam fa	I Agent: imiliar with and accept the obligations of the pos	ition
Signatura a	f New Registered Agent, if changing	
Signature of	tren regimeren ugestif å etmignik	

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; GFO = 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 Doc, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PI	John Doe		
X Remove	$\underline{\mathbf{y}}$	Mike Jones		
_X .Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1)Change	VP	BARRETO ALBA, SUSANA ISABEL	7006 N OREGON AVE	
X Add			TAMPA, EL 33604	
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4)Change				
Add			,	
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
		Page 2 of 4		
E. If amending or add (Attach additional sh	ing addit eats. if no	ional Articles, enter change(s) here: cessary). (Be specific)		

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Adoption of Amendment(s)	(CHECK-ONE)
The amendment(s) was/were adopted by the shareholders was/were suffice	d by the shareholders. The number of votes east for the amendment(s) tent for approval.
The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting groups. The following statement h 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 adopte action was not required.	d by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder
Dated 12-10-720	ctor, president or other officer - if directors or officers have not been
selected, i	etor, president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court (fiduciary by that fiduciary)
JC	JAN J ESPÍNOSA JIMENEZ
	(Typed or printed name of person signing)
Þ	RESIDENT

(Title of person signing)