PZ000033141

(Red	questor's Name)	
(Add	Iress)	
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(Add	iress)	
(City	/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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5 ROJERTS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: QUINTANA DELI	IVERY SERVICE INC.			
DOCUMENT NUME	ER: P20000033141				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	JUDITH C. DE LEON				
		Name of Contact Person			
	QUINTANA DELIVERY SERVICE INC.				
	Firm/ Company				
	11804 THICKET WOOD D	R			
		Address			
	RIVERVIEW FL 33579				
		City/ State and Zip Code			
	JCFDELEON020985@GMA	IL.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	a concerning this matter, pleas	se call:			
JUDITH C. DE LEON		at (<u></u> 813	312-0114		
Name of Contact Person		Area Coo	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	urtment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment

10

Articles of Incorporation

of

QUINTANA DELIVERY SERVICE INC

(Name of Corporation as current	ly filed with the Florida Dept. of State)	
P2000003	3141	
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of the corporation:		
QUINTANA DELIVERY SERVICE INC		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must co	
B. Enter new principal office address, if applicable:	11804 THICKET WOOD DR.	0,77
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	RIVERVIEW FL 33579	· ·
		;
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
<u> </u>		.9
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres Name of New Registered Agent		
11804 H	icket Wood Dr	
New Registered Office Address: Riveruie		33579. (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		ion.
Judith C De Signature of New P	Leon Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

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) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	or adding additional A onal sheets, if necessary,). (Be specific)			
	<u> </u>				
			·		
	 				
		·	<u> </u>		
·					
f an amendr	nent provides for an ex	change, reclassific	ation, or cancellatio	on of issued shares,	
(if not a	or implementing the ar pplicable, indicate N/A)	nengment if not co	ntained in the amer	idment itself:	
(3)	· · · · · · · · · · · · · · · · · · ·				

The date of each amendment(s) adoption: late this document was signed.	07/07/23	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doo locument's effective date on the Departmen	es not meet the applicable statutory filing requirements, this date wil at of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without shareholder action and	l shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.	
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):	
"The number of votes east for the a	emendment(s) was/were sufficient for approval	
by	,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
	(voting group)	
selected, by an	oresident or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court chary by that tiduciary)	
<u>Ju</u>	(Typed or printed name of person signing)	
	(Title of person signing)	