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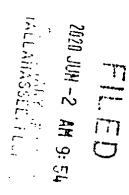
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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ertified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
Special instructions to	rilling Officer.	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: The Brothers JAJA Transport DOCUMENT NUMBER: 2000036266
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gina Kocha
AB All Services
1100 West Dark Street, Ste C
Hallah, Fl 33012
E-mail address: (to be used for future infinal report notification)
For hyther information concerning this matter, please call:
Jina Kocha 305, 882-1238
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee

Mailing Address
Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

•	Articles of Amendment FILED
	Articles of Incorporation
the Brothers	JA 9"JA THUMSTOOFF SUCON
P2000036	poration as currently filed with the Florida Debt. of State)
(1	Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:
	The new
name must be distinguishable and contain the wo "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc." or "Co". A professional corporation name must contain the word
3. Enter new principal office address, if appl	icable:
Principal office address <u>MUST BE A STREE</u>	TADDRESS)
	
	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFIC	E BOX)
Manager and the second	
new registered agent and/or the new regis	egistered office address in Florida, enter the name of the tered office address:
Names of Name Business I Association	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
Registered Agent's Signature, if changin	g Registered Agent:
ery accept the appointment as registered ag	gent. I am familiar with and accept the obligations of the position.
•	Signature of New Registered Agent, if changing

c if applicable

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	PT John Doe
X Remove	<u>V</u> <u>Mike Jones</u>
X Add	SV Sally Smith
Type of Action Check One) 1) Change Add	P Edwards 16603 SW 61 St Way Corvantes microi, Fl 33193
Remove Change Add	P Edwards Ruiz miami, FL 33193 Cervantes
Remove Change Add	
Remove	
Change Add	
Remove	
Add	
Change	
Add Remove	

	necessary). (Be spec	ufic)			
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n amendment provides ovisions for implementi	ing the amendment if	assincation, or ca	teenauon or issue	a snares,	
(if not applicable, indic	cate N/A)	nor contained in t	ne amendment its	en.	
17	,				
					
					
					
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The date-of each amendment(s) adoption:
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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each 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)
$\sim (0/1/20)$
Dated
Signatury
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
X Edwards Ruiz Cervaines
(Typed or printed name of person signing)
X Edwards Ruiz Cervantes
MINDER / Deach don't
(Title of person signing) (Wher / President
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