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.

(((H20000419494 3)))



H200004194943ABC0

To:			
	Division of Corporations		
	Fax Number : (850)617-6380		
From:			
	Account Name : AB ALL SERVICES INC		
	Account Number : I20200000155		707
	Phone : (305)882-1238		$\stackrel{\smile}{=}$
	Fax Number : (305)882-1260		2020 DEC
-	Enter the email address for this business entity to be used for	**	
•	annual report mailings. Enter only one email address please.	-	
<u>n</u>	annual report mailings. Enter only one email address please.		
3: 3:	annual report mailings. Enter only one email address please.		
⊃:: ::::::::::::::::::::::::::::::::::	annual report mailings. Enter only one email address please.  Email Address:  COR AMND/RESTATE/CORRECT OR O/D RESIGN		
⊃:: ::::::::::::::::::::::::::::::::::	annual report mailings. Enter only one email address please.  Email Address:  COR AMND/RESTATE/CORRECT OR O/D RESIGN  THE BROTHERS JA& JA TRANSPORT CORP		
2020 DEC -8 PM 3: 3U	annual report mailings. Enter only one email address please.*  Email Address:  COR AMND/RESTATE/CORRECT OR O/D RESIGN  THE BROTHERS JA& JA TRANSPORT CORP  Certificate of Status  O  Certified Copy  0		

Electronic Filing Menu

Corporate Filing Menu

DEC () , SOSO

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: THE BROTHERS.	JA& JA TRANSPORT CO	RP
DOCUMENT NUMBI	ER: P20000036266		
	f Amendment and fee are sul	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
F	LIZABETH FLEITAS		
-		Name of Contact Person	
A	AB ALL SERVICES INC		
-		Firm/ Company	
1	100 WEST 29ST STE C		
_		Address	
ŀ	HALEAH FL 33012		
_		City/ State and Zip Code	
/	\B1100@YAHOO.COM		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ELIZABETH FLEITA	5	at ( 305	882-1238
Name of	Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fcc	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Fiting Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee E. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	y filed with the Florida Dept. of State	)
P20000036266		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the f	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		Th <b>e</b> new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."		reviation "Corp.,"
3. Enter new principal office address, if applicable:	1815 FLORIDA MANDO RD	
Principal office address MUST BE A STREET ADDRESS	WEST PALM BEACH FL 33406	·····
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1815 FLORIDA MANGO RD	
	WEST PALM BEACH FL 33405	- 30
		6
		, , , , o
<ol> <li>If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address;</li> </ol>		
	<b>L</b>	8 1.11.11.18
Name of New Registered Agent		
		<del></del> :
(Florida sira 1815 FLORIDA MANGO	•	1406
	1815 FLORIDA MANGO RD , Florida 3	
New Registered Office Address:	, i locida_	(Zip Code)

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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	Υ	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) X Change	P	EDWA	ARDS RUIZ CERVANTES	1815 FLORIDA MANGO RD
Add				WEST PALM BEACH
Remove				FL 33406
2) Change				
Add				
Remove 3) Change				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	<del></del>			
Add				
Remove				

If amending or adding additional Artical (Attach additional sheets, if necessary).	(Be specific)
***************************************	
· · · · · · · · · · · · · · · · · · ·	
·	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

12-8-2020	
The date of each amendment(s) adoption:	, if other than the
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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 cntitled to vote separately on the amendment(s):	!
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voling group)	
12-8-2020 Dated	
Dated	
Signature  (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)	
EDWARDS RUIZ CERVANTES	
(Typed or printed name of person signing)  PRESIDENT	
(Title of person length	