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To:	Division of Corporations			
	Fax Number : (850)617-6380			
From:				
	Account Name : AB ALL SERVICES INC			
	Account Number : I20200000155 Phone : (305)882-1238			
	Fax Number : (305)882~1260			
**	Enter the email address for this business entity to be used	for futu	re	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: THE BROTHERS J	A& JA TRANSPORT COR	<u></u>		
DOCUMENT NUMB	ER: P 200000 3	9 <i>0</i> 50			
The enclosed Articles of	of Amendment and fee are sub-	mitted for filing.			
Please return all corres	pondence concerning this matt	er to the following:			
	ELIZABETH FLEITAS				
•	AB ALL SERVICES INC	Name of Contact Person			
	——————————————————————————————————————	Dissil Comment			
	1100WEST 29ST STE C	Firm/ Company			
		Address	1835		
	HIALEAH FL 33012				
		City/ State and Zip Code			
	ABI100@YAHOO.COM				
	E-mail address: (to be use	ed for future annual report i	iotification)		
For further informatio	n concerning this matter, pleas	e call:			
ELIZABETH FLEITA	AS	at {	882-1238 le & Daytime Telephone Number		
Name	of Contact Person	Area Coo	le & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made p	payable to the Florida Depa	rtment of State:		
☐ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fec & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
And Div P.O	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address Incut Section In of Corporations Entre of Tallahassee I. Monroe Street, Suite 810 Issee, FL 32303		

Articles of Amendment to Articles of Incorporation of

(Maine of Corporation as corrend)	v filed with the Florida Dept. of State)			
20000036266					
(Document Number of	Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this answers of Incorporation:	Florida Profit Corporation adopts the	followin	g amend	lment(s)	
A. If amending name, enter the new name of the corporation:					
			_The i		
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chortered," "professional association," or the abbreviation "P.A."	company, "or "incorporated" or the ab professional corporation name mus	hreviatio L'eontau	on "Corj n the w	o.," ord	
3. Enter new principal office address, if applicable:	1815 FLORIDA MANGO RD				
Principal office address MUST BE A STREET ADDRESS)	WEST PALM BEACH FL 33405				
				_	
				_	
C. Enter new mailing address, if applicable:	1815 FLORIDA MANGO RD				
(Mailing address MAY BE A POST OFFICE BOX)	WEST PALM BEACH FL 33405	3:	20	_	
		<u> </u>	57	-	
		•	<u></u>	- - <u>:</u>	
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the	· .	<i>2</i>	TIT!	
new registered agent and/or the new registered office address	<u>s:</u>	•	7		
Name of New Registered Agent		<u>+</u> 1	<u>- က</u>		
1815 FLORIDA MANGO	RD		_ 🙄		
`	reet address)	22405			
WEST PALM BEACH	, Florida		Code)		
New Registered Office Address:	(Citv)	/7:			

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)

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>	Mikg Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	P	EDWARDS RUIZ CERVANTES	1815 FLORIDA MANGO RD
			WEST PALM BEACH FL 33406
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Reinove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Кеппоче			

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f an amendment provides for an excha	nge reclassifics	ation, or ca	ncellation of i	ssued shares	2	
provisions for implementing the amen-	dment if not co	ntained in t	he amendme	nt itself:		
(if not applicable, indicate N/A)						
	<u></u>					
						
					·	
					- -	

	12/12/2020	
The date of each amendment(s) adoption date this document was signed.	n:	, 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 d document's effective date on the Department	oes not meet the applicable statutory filing requirements, this dent of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	y the incorporators, or board of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the amendment it for approval.	(s)
☐ The amendment(s) was/were approved must be separately provided for each t	by the shareholders through voting groups. The following staten voting group entitled to vote separately on the amendment(s):	ient
"The number of votes east for the	e amendment(s) was/were sufficient for approval	
by		
by	(voting group)	
12/12/2020 Dated	Cenna	
(By a director selected, by	president or other officer - if directors or officers have not been incorporator - if in the hands of a receiver, trustee, or other conductary by that fiduciary)	art
EDW	ARDS RUIZ CERVANTES	
	(Typed or printed name of person signing)	
PRES	SIDENT	
	(Title of person signing)	