6/1/22, 4:24 PM

Division of Corporations

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Fax Number : (850)617-6380

From:

Account Name : LAXMY'S CARRIER SERVICES

Account Number : I2004000007 Phone : (305)640-0281 Fax Number : (305)489-2902

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN DAN XPRESS TRANSPORT INC

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J. HORNE

JUN - 2 2022

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From: LAXMY CHACON

## **COVER LETTER**

Division of Corp			•	٠.	••
NAME OF CORPO	PRATION: DAN XPRESS TR	ANSPORT INC			
DOCUMENT NUM	D20000026201				
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following	9:		
	DANIELKYS GONZALEZ				
		Name of Contac	t Person		-
	DAN XPRESS TRANSPORT	I INC			
	·.	Firm/ Comp	pany		
· •	828 E TRINIDAD AVE				
	····	Address	3		_
	CLEWISTON FL, 33440				
		City/ State and ?	Zip Code		-
	GAIL.LAXMYSCARRIER@	GMAIL.COM	-		
	E-mail address: (to be us		l report i	notification)	
		• . •	• •		
For further informati	on concerning this matter, pleas	se call:			
LAXMY CHACON		at ( <u>305</u>		640-0281	
Name	of Contact Person		Area Cod	e & Daytime Telephone Numbe	:r
Enclosed is a check f	or the following amount made	payable to the Flori	ida Depa	rtment of State:	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copenclosed)	,	Certificate of Status Certified Copy (Additional Copy is enclosed)	
An Dir P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314		Division The Ce 2415 N	nent Section of Corporations ntre of Tailahassee . Monroe Street, Suite 810 see, FL 32303	

## Articles of Amendment to Articles of Incorporation of

DAN XPRESS TRANSPORT INC				
(Name o	of Corporation as current	ly filed with the Florida De	ept. of State)	
P20000036393				
	(Document Number of	of Corporation (if known)	TAS	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	لنايا	endiment(s) to
A. If amending name, enter the new na	ame of the corporation:		ARY SSEE.	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cochartered." "professional association,"	Corp," "Inc," or "Co".	A professional corporation	I" or the abbreviation."C name must contain the	orp
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)  D. If amending the registered agent ar	OFFICE BOX) ad/or registered office add	iress in Florida, enter the n	name of the	
new registered agent and/or the ne	w registered office address  DANILO GONZALEZ	<u>s:</u>		
Name of New Registered Agent				
	828 E TRINIDAD AVE			
	(Florida st	reet address)		
New Registered Office Address:	CLEWISTON		, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar			
Check if applicable  The amendment(s) is/are being filed p	ursuant 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	PT Joh	<u>John Doe</u>		
X Remove	Y Mik	Mike Jones		
X Add	<u>SV</u> Sall	ly Smith	·· · · · · · · ·	
Type of Action (Check One)	Title	Name	Address	
1) Change	P	DANELKYS GONZALEZ	828 E TRINIDAD AVE	
Add			CLEWISTON, FL 33440	
Remove 2) Change	P	DANILO GONZALEZ	828 E-TRINIDAD AVE	
X Add			CLEWSITON, FL 33440	
Remove 3) Change	<del></del>			
Add				
Remove 4) Change				
Add	<del></del>			
Remove				
5) Change Add				
Remove	٠,			
6) Change	<del></del>	····		
Add				
Remove				

trach additional sheets, if necessary).	(Be specific)	
		<u>,                                      </u>
		•
	<u> </u>	
	. ,	•
an amendment provides for an exch	ange, reclassification, or cancellation	of issued shares;
rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amend	ment itseit:
(g not applicable, similare min)		

The date of each amendment(s) ad	06/01/2022 option:	, if other than the
date this document was signed.		
	/2022	
Effective date if applicable:	(no more than 90 days after amendm	nent file date)
Note: If the date inserted in this bl document's effective date on the De		g requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors w	ithout shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes of ficient for approval.	ast for the amendment(s)
must be separately provided for	roved by the shareholders through voting groups.	he amendment(s):
	for the amendment(s) was/were sufficient for app	TOVAL
by	(voting group)	
06/01/2022 Dated	A	
Signature	10919/12	
selected	ector, president or other officer - if directors or of , by an incorporator - if in the hands of a received id fiduciary by that fiduciary)	
	DANELKYS GONZALEZ	
•	(Typed or printed name of person sign	ing)
	p'	
•	(Title of person signing)	