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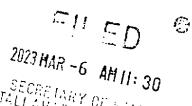


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AAG TRANSPOR	TATION INC	
DOCUMENT NUMB			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	FERNANDO AVILA		
		Name of Contact Persor	1
		Firm/ Company	
	150 EAST 1ST AVE SUITE	914	
•		Address	
	HIALEAH, FL 33010		
		City/ State and Zip Code	e
For further information	E-mail address: (to be us	sed for future annual report	notification)
FERNANDO AVILA		at (<u>305</u>	834-6523
Name c	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee S. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of



AAG TRANSPORTATION INC

(Name of Corporation as currently filed with the Florida Dept. of State) P20000046268 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the follows Articles of Incorporation: A. If amending name, enter the new name of the corporation: AA CELLULAR DISTRIBUTOR INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrewing, " or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must conclusive distinguishable and association," or the abbrewiation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	owing amendment(s) to The new viation "Corp."
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the folloits Articles of Incorporation: A. If amending name, enter the new name of the corporation: AA CELLULAR DISTRIBUTOR INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "lnc.," or "Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must co "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	The new viation "Corp ,"
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name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "bic.," or "Co.," or the designation "Corp.," "lic.," or "Co". A professional corporation name must co "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable:	viation "Corp ,"
"Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must or "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable:	viation "Corp ,"
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C. Enter new mailing address, if applicable:	
C. Enter new mailing address, if applicable:	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
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	<u> </u>
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D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City)	(Zip Code)

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 Do	<u>t</u>	
X Remove	<u>V</u>	Mike Jos	nes	
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
റ Change		_		
Add				
—— Remove				

amending or adding additional Arti- trach additional sheets, if necessary).	(Be specific)				
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an amendment provides for an exch	ange, reclassificati	on, or cancellatio	on of issued shar	es.	
rovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not cont:	ained in the ame	<u>ndment itself:</u>		
		***		- . , <u>.</u>	
					
					
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	,	1			
			<u> </u>		

date this document was signed.	adoption:
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as to Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
11/21/20: Dated	2
Signature X	X
selec	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	FERNANDO AVILA
	(Typed or printed name of person signing)
	PRESIDENT

(Title of person signing)