

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.

(((H20000330648 3)))



H2000033064B3ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DBS DIEZ BUSINESS SERVICES INC

Account Number : I20170000086
Phone : (813)871-1816
Fax Number : (813)884-5920

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN LIMA LIMON FOOD EXPRESS CORP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

5-12-7-

Articles of Amendment to Articles of Incorporation of

•	13.4.4	1	DAON	COOD	EXPRESS CORP
1	IIVI A	-1	LOUI IN	P-1 H 31 1	PXPKPNNIINP

EMAY EMAN TOOD EXTRESS CORE				
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)		
P20000060182				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the follo	wing amendine	ent(s) to
A. If amending name, enter the new n	ame of the corporation:			
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbrev A professional corporation name must co		,
B. Enter new principal office address, if applicable:		6120 E BROADWAY AVE		
(Principal office address MUST BE A S		TAMPA, FL 33619		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		6120 E BROADWAY AVE		
		TAMPA, FL 33619		
			20	
			2020 SEP 22	
 If amending the registered agent ar new registered agent and/or the ner 			<u> </u>	η
-	w registered office addres		22	[
Name of New Registered Agent				m
6120 E BROADWAY A		<u> </u>	PH 12:	
New Registered Office Address:	(Florida s TAMPA	reel address) 7 336 , Florida		
THE RESISTENCE OFFICE MULTICAS.		 	Zip Code)	
			•	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen ered agent. I am familiar	it; with and accept the obligations of the positi	on.	
	Signature of New	Registered Agent, if changing		
Check if applicable	- -			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Example:

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 John Doe <u>PT</u> <u>V</u> X Remove Mike Jones Sally Smith <u>X</u> Add ŞΥ Type of Action Title Name Address (Check One) **AURELIA CONTRERAS** 6120 E BROADWAY ÂVÊ 1) X Change TAMPA, FL 33619 _ Add _ Remove 2) ____ Change _ Add __ Remove __ Change __ Add _ Remove 4) ____ Change __ Add __ Remove 5) ____ Change _ Add _ Remove 6) ____ Change Add Remove

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)		
			
			
		<u> </u>	
.,			
		2020	
		2020 SEP	7
		22	
·		22 PN 2: 0	17
		2: 6	<u>`</u>
		· · ·	
F. If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:		
(if not applicable, indicate N/A)			
		<u></u>	

	09/08/2020	
The date of each amendmen		, if other than th
date this document was signer		
Effective date if applicable:	09/08/2020	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date with Department of State's records.	rill not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action a	nd shareholder
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		2020
	(voting group)	F 2020 SEP
	· ·	. Р 2
Dated	9- Y- 2020	22
	0101	e 😎 📶
Signature (who calls	
	By a director, president or other officer - if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	= =
а	ppointed fiduciary by that fiduciary)	
	AURELIA CONTRERAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	