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8/13/2021

P20000097268

Division of Corporations  
Florida Department of State  
Bureau of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)817-6388

From: Account Name : AB ALL SERVICES INC  
Account Number : 179280009155  
Phone : (895)891-1238  
Fax Number : (305)881-1268

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

Email Address: ab1105@yahoo.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
LC TRANSPORT EXPRESS INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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2021 AUG 19 PM 4:54

FILED  
2021 AUG 19 PM 12:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend.*

AUG 20 2021

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850-617-6381

8/19/2021 11:24:10 AM PAGE 1/001 Fax Server



August 19, 2021

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LC TRANSPORT EXPRESS INC  
3350 NW 95 ST  
MIAMI, FL 33147

SUBJECT: LC TRANSPORT EXPRESS INC  
REF: P20000097268

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Fax cover page was not received.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

FAX Aud. #: H21000306040  
Letter Number: 421A00019872

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: LC TRANSPORT EXPRESS INC

DOCUMENT NUMBER: P20000097268

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

YOISET GARCIA

Name of Contact Person

AB ALL SERVICES INC

Firm/ Company

1100 WEST 29 ST SUITE C

Address

HIALEAH FL 33012

City/ State and Zip Code

AB1100@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YOISET GARCIA

Name of Contact Person

at ( 305 )

882-1238

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

LC TRANSPORT EXPRESS INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P2000007268

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "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:**(Mailing address **MAY BE A POST OFFICE BOX**)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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

MIRELSI MORALES

3350 NW 95 ST

(Florida street address)

New Registered Office Address:

MIAMI

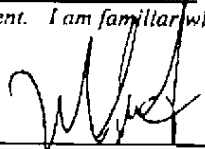
(City)

, Florida 33147

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

  
 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.

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.

Example:

☒ Change      PT      John Doe  
☐ Remove      V      Mike Jones  
☐ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	P	LISDEL FERNANDEZ	3350 NW 95 ST
<input type="checkbox"/> Add			MIAMI FL 33147
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	P	MIRELSI MORALES	3350 NW 95 ST
<input checked="" type="checkbox"/> Add			MIAMI FL 33147
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**  
(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: 08/17/2021, if other than the date this document was signed.

Effective date if applicable: 08/17/2021  
(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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval  
by \_\_\_\_\_."  
(voting group)

Dated 08/13/2021

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)

LISDEL FERNANDEZ

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)