## P21000036996

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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09/18/21--01015--023 \*\*85.00

2021 SEP 13 PM 1: 57

Amend

SEP 28 7021 LALBRITTON

## COVER LETTER

TO: Amendment Section Division of Corporations

		ATION: ELCE TRANSPOR ER: P21000036996	RTINC					
		f Amendment and fee are su	bmitted for filing.					
Please retu	rn all corresp	ondence concerning this ma	tter to the following:					
	F	ELIZABETH RAVELO ERR	RASTI					
	_	Name of Contact Person						
	Firm/ Company							
	14150 SW 84 ST APT 1-307 Address							
	MIAMI FL 33183  City/ State and Zip Code							
		concerning this matter, pleas						
ELIZABE	TH RAVELO		at (786	de & Daytime Telephone Number				
Enclosed is		Contact Person the following amount made						
■ \$35 Fi	ling Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
	Amei Divis P.O. 1	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303				

## Articles of Amendment to Articles of Incorporation of

of

ELUE TRANSPORTS INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P21000036996	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:	(s) to
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". 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 <u>MUST BE A STREET ADDRESS</u> )	
(Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable:	1.
<u> </u>	
C. Enter new mailing address, if applicable:	3
(Mailing address MAY BE A POST OFFICE BOX)	تعد ما
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	
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)	
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,	
() izapeth Ravelo Genasti	
Signature of New Registfred Agent, if changing	

Check if applicable

 $\Box$  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; CEQ = 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	1,1	John De	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VP		CESAR DELISLE CLARO	14150 SW 84 ST APT I-307
X Add		_		MIAMI FL 33183
Remove				
2) Change		<del></del>		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	09/08/2021	
The date of each amendment(s) adoptio 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 date will nent of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	by the incorporators, or board of directors without shareholder action and sl	ureholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) at for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selegied, by a appointed fide	porth (avelo equal)  president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court action by that (iduciary)  ABETH RAVELO ERRASTI	
	(Typed or printed name of person signing)	
PRES	IDENT	

(Title of person signing)