P21000054635

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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: J & J MEDICAL I	DELIVERY AND TRANSI	PORTATION INC	_		
	1BER: P21000054635			_		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	FRANCISCO CONTRERAS	;				
		Name of Contact Person	n			
		Firm/ Company				
	17326 WHITE MANGROVE DR					
	Address					
	WIMAUMA, FL 33598					
		City/ State and Zip Code	e			
	E-mail address: (to be us	sed for future annual report	notification)	_		
For further informati	on concerning this matter, pleas	se call:		ço.	21	
FRANCISCO CON	TRERAS	at (ì		2022 OCT 11	<u>ال</u> اً
Name of Contact Person		Area Co) de & Daytime Telephone N	umber 5		CONTRACTOR IN
Enclosed is a check t	for the following amount made			164 150 170	715	i i i i i i i i i i i i i i i i i i i
■ \$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)	TO	3: 59	
	ailing Address		Address			
Amendment Section		Amend	Iment Section			

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

J & J MEDICAL DELIVERY AND TRANSPORTATION INC.

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

(Name o	of Corporation as currently filed wi	th the Florida Dept. of State)	
P21000054635			
	(Document Number of Corpora	tion (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida P</i>	<i>trofit Corporation</i> adopts the followin	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
J&G GLOBAL TRANSPORTATION IS	SC .		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association,"	Torp," "Inc," or "Co". A professi		
B. Enter new principal office address, (Principal office address MUST BE A S			
 C. Enter new mailing address, if apple (Mailing address MAY BE A POST) D. If amending the registered agent and apple (Mailing address) 	ofFICE BOX) id/or registered office address in Fl	orida, enter the name of the	2022 00
new registered agent and/or the new	v registered office address:		
Name of New Registered Agent	JULIO GONCALVES	<u> </u>	
	17326 WHITE MANGROVE DR	iga ga	
	(Florida street addres.	y - 100 115	- بن 🍛
New Registered Office Address:	WIMAUMA	, Florida	59
	(Ciny)	(Zip G	Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent:	accept the obligations of the position.	Cade)
	Signature of New Registered	Agent, if changing	
Check if applicable			

' 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: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	FRANCISCO CONTRERAS	17326 WHITE MANGROVE DR
Add			WIMAUMA, FL 33598
X Remove			
2) X Change	р 	JULIO GONCALVES	17326 WHITE MANGROVE DR
Add			WIMAUMA, FL 33598
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets.	, if necessary).	(Be specific)			
				<u> </u>	
					
<u> </u>					<u> </u>
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			<u>.</u>		
•					
	<u>-</u>				_ .
f an amendment provi	des for an excha	nge, reclassifica	tion, or cancellat	ion of issued sha	res.
provisions for impleme	enting the amen	dment if not con	tained in the am	endment itself:	
(if not applicable, is	ndicate N/A)				
				-	
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					,

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
09/21/2022	
Effective date <u>if applicable</u> :	
(no more than 90 day	es after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board action was not required.	l of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	aber of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	fficient for approval
by	•
(voting group)	 ;
,	
09/21/2022 Dated	_
(By a director, president or other officer – selected, by an incorporator – if in the har appointed fiduciary by that fiduciary)	
Julia Goncal (Typed or printed name	10 Z
(Typed or printed name	of person signing)
Tranden	
(Title of person signing	(1)