



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.

((H22000083288 3)))



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To:

Division of Corporations
Fax Number : (850)617-6380

Account Name : PRIME ACCOUNTING & CONSULTANCY LLC
Account Number : I20180000090
Phone : (407)232-6777
Fax Number : (407)710-0533

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
G.B. SONS FREIGHT INC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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J. HORNE

MAR 28 2022

Electronic Filing Menu

Corporate Filing Menu

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RECEIVED
2022 MAR 25 PM 4:38
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

FILED
2022 MAR 25 AM 8:25
SECRETARY OF STATE
TALLAHASSEE FL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: G.B. SONS FREIGHT INC

DOCUMENT NUMBER: P21000062255

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

Please return all correspondence concerning this matter to the following:

FELIPE D MARDAKIS
Name of Contact Person
ASCENT ACCOUNTING GROUP
Firm/ Company
7345 W SAND LAKE RD STE 209
Address
ORLANDO/FL, 32819
City/ State and Zip Code
FILINGS@ASCENTACCOUNTING.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FELIPE D MARDAKIS at (407) 2326777
Name of Contact Person Area Code & Daytime Telephone Number

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

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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



March 15, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

G.B. SONS FREIGHT INC
8728 LOOKOUT POINTE DR
WINDERMERE, FL 34786US

SUBJECT: G.B. SONS FREIGHT INC
REF: P21000062255

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.

PLEASE LIST THE COMPLETE NAME OF THE CORPORATION IN SECTION D THAT IS LISTED AS THE NEW REGISTERED AGENT.

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.

Darlene Connell
Regulatory Specialist II Supervisor

FAX Aud. #: H22000083288
Letter Number: 622A00006185

Articles of Amendment
to
Articles of Incorporation
of

FILED ((H22000083288 3)))
2022 MAR 25 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FL

G.B. SONS FREIGHT INC

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

P21000062255

(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**)

7939 CORKFIELD AVENUE

ORLANDO, FL, 32832

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

7939 CORKFIELD AVENUE

ORLANDO, FL, 32832

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

KTORRES SERVICES CORP

201 SE 15th TER, STE211, DEERFIELD BEACH, FL, 33441

(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.

Kardina Torres

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.

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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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|--|-------|---------------------------|------------------------|
| 1) <input type="checkbox"/> Change | P | DA SILVA BENTO, FAUSTO | 8728 LOOKOUT POINTE DR |
| <input type="checkbox"/> Add | | | WINDERMERE, FL 34786 |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change | P | BETHEL HOLDING & INVESTME | 7939 CORKFIELD AVE |
| <input checked="" type="checkbox"/> Add | | | ORLANDO, FL 32832 FL |
| <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)

[illegible]

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)

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

Effective date if applicable: _____
(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)

03/04/2022
Dated _____

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)

FAUSTO DA SILVA BENTO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)