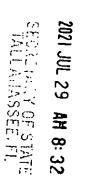
P21000062507

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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TO:

Amendment Section

Division of Corporations NBA TRANSPORT SERVICES INC SUBJECT: Name of Corporation **DOCUMENT NUMBER:** The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: YEXENIA VALLE TORRES Name of Contact Person Firm/Company 15408 SW 34TH ST Address MIAMI, FL 33185 City/State and Zip Code nbatransportservicesinc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: YEXENIA VALLE TORRES Name of Contact Person Enclosed is a check for the following amount: ■ \$35.00 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

| Name of Corporation as currently filed with the Florida Dept. of State | |
|---|--|
| P21000062507 | |
| Document Number (if known) | |
| | |
| Pursuant to the provisions of Section 607.0124, Florida Statutes. | |
| These articles of correction correct THE NAME OF THE REGISTERED AG (Document Type Being Corr | ENT |
| (rounded type toung con | ceica) |
| iled with the Department of State on | · |
| Specify the inaccuracy, incorrect statement, or defect: | |
| THE NAME OF THE REGISTERED AGENT IS YEXENIA VALLE TORRES | |
| AND IN ARTICLE 5 OF THE CORPORATION IT IS LISTED AS | |
| I WANT TO REMOVE THE LETTER (P) OF THE REGISTERED AGENT | |
| AND LEAVE ONLY MY NAME WHICH IS YEXENIA VALLE TORRES AND P | UT ME AS PRESIDENT, |
| AM THE ONLY PRESIDENT OF THIS CORPORATION. | |
| Correct the inaccuracy, incorrect statement, or defect: | |
| REMOVE THE LETTER(P) YEXENIA VALLE TORRES P ARTICLE (V) | <u> </u> |
| AND PUT ONLY YEXENIA VALLE TORRES | 20 SE 7 |
| YEXENIA VALLE TORRES IS THE PRESIDENT | ACA ACA ACA ACA ACA ACA ACA ACA ACA ACA |
| | <u> </u> |
| | S 2 9 |
| | SES T |
| | <u> </u> |
| Alle | , W. 33 |
| (Signature of a director, president or other officer - if directors or officers had not been selected, by an incorporator - if in the hands of the receiver, truste | |
| other court appointed fiduciary, by that fiduciary.) | |
| YEXENIA VALLE TORRES PRE | |
| | SIDENT |

Filing Fee: \$35.00

(Typed or printed name of person signing)

(Title of person signing)