## P21000071507

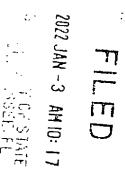
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: AG&RR TRUCKI	NG CORP	
DOCUMENT NI	UMBER: P21000071507		<u> </u>
	cles of Amendment and fee are su	bmitted for filing.	
Please return all e	orrespondence concerning this ma	tter to the following:	
	MAYLEN RODRIGUEZ		
		Name of Contact Persor	1
	BEST TRANSPORT AND CARRIER SERVICES INC		
		Firm/ Company	
	9550 NW 79 AVE STE 9		
	<del>.</del>	Address	
	HIALEAH GARDENS FL 3.	3016	
		City/ State and Zip Code	<del> </del>
	bestearrierservices@gmail.co	ອກາ	
	<b></b>	sed for future annual report	notification)
For further inform	nation concerning this matter, please		597-0058
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fo	ee □\$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		Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

AGARR	TIME	TOTAL NICE	CANDD
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(Name of Corporation	on as currently filed wit	h the Florida Dept. of State)	
P21000071507			
(Docum	ent Number of Corporati	ion (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Pr	ofit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the co	rporation:		The new
name must be distinguishable and contain the word "co	rnoration ""company"	or "incornorated" or the abbi	
"Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professio	onal corporation name must	contain the word
n N. A		,	: 5
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		·- · · · · · · · · · · · · · · · · · ·	
			<u> </u>
		(d) ( (n)	□ 量 □
		<u>ξί</u> ζ	
C. Enter new mailing address, if applicable:	• 6.	r-1' <u></u>	-
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>X</u> )		7
	·		
		· <u>-</u>	
D. If amending the registered agent and/or register		rida, enter the name of the	
new registered agent and/or the new registered of	office address:		
Name of New Registered Agent			
	(Florida street address,	. <u>.                                   </u>	
V D : 10m		r(:	
New Registered Office Address:	(Citv)	, Florida	(Zip Code)
	( = 1 <b>, )</b>		
New Registered Agent's Signature, if changing Regi	istered Agent:		
I hereby accept the appointment as registered agent.	l am familiar with and ac	acept the obligations of the po	sition.
<i>(**</i>	to a d'Al D	to me if alcanoine	
Signa	tture of New Registered :	agent, ij changing	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	ANA MARY PEREZ	1302 WEST 44 PL
Add			HIALEAH FL 33012
X Remove			
2) Change	VP	ABEL CADAVIECO FLEITAS	1302 WEST 44 PL
X Add			HIALEAH F1. 33012
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
•	
	· -
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

	12/28/2021	
The date of each amendmen		, if other than the
date this document was signe	:d. 	
Effective date if applicable:		
	tno more than 90 days after ame	indment file date)
	this block does not meet the applicable statutory fithe Department of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/w action was not required.	ere adopted by the incorporators, or board of director	's without shareholder action and shareholder
	ere adopted by the shareholders. The number of votowere sufficient for approval.	es cast for the amendment(s)
	ere approved by the shareholders through voting grouded for each voting group entitled to vote separately	· · · · · · · · · · · · · · · · · · ·
"The number of vot	es cast for the amendment(s) was/were sufficient for	approval
bv		
•	(voting group)	
1 <i>2/</i> 2	8/2021	
Dated		
	him	
	By a director, president or other officer – if directors selected, by an incorporator – if in the hands of a recomposited (iduciary by that fiduciary)	
	RIGEL RAVELO	
	(Typed or printed name of person:	signing)
	PRESIDENT	
	(Title of person signing)	