

P2100007424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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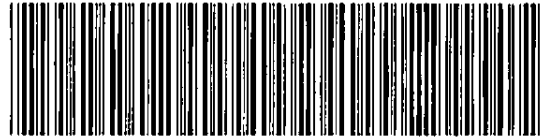
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RF CARGO EXPRESS OF THE PALM BEACHES CORP

DOCUMENT NUMBER: P21000077424

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

Please return all correspondence concerning this matter to the following:

LEANDRO BARRIOS VEGA

Name of Contact Person

CARIBBEAN CRAGO EXPRESS OF THE PALM BEACHES CORP

Firm/ Company

4749 N AUSTRALIAN AVE APT 203

Address

MANGONIA PARK FL 33407

City/ State and Zip Code

LEOBARRIOSVEGA@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEANDRO BARRIOS VEGA

at (786)

301-6134

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:

☐ \$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)

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

Articles of Amendment
to
Articles of Incorporation
of

RF CARGO EXPRESS OF THE PALM BEACHES CORP

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

P21000077424

(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:

CARIBEAN CARGO EXPRESS OF THE PALM BEACHES CORP

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**)

4749 N AUSTRALIAN AVE APT 203

MANGONIA PARK FL 33407

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

4749 N AUSTRALIAN AVE APT 203

MANGONIA PARK FL 33407

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

LEANDRO BARRIOS VEGA

4749 N AUSTRALIAN AVE APT 203

(Florida street address)

New Registered Office Address:

MANGONIA PARK

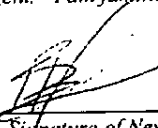
(City)

Florida 33407

(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.


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.

FILED
2024 SEP -3 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	PT	LEANDRO BARRIOS VEGA	4767 N AUSTRALIAN AVE APT 105 MANGONIA PARK FL 33407
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	VP	ELENA BLANCO ESCARRA	4749 N AUSTRALIAN AVE APT 203 MANGONIA PARK FL 33407
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	P	RADHAMES RAMOS	795 CARISSA DR ROYAL PALM BEACH FL 33411
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	V	HAMILTON CASTILLO	9271 WEDGEWOOD DR TAMARAC FL 33321
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			

(Attach additional sheets, if necessary). (Be specific)

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:

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)

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)

LEANDRO BARRIOS VEGA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)