077669

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1/19/2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RVS TRANSPOR	TINC	
DOCUMENT NUM	P21000077660		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	RANFIE JIMENEZ		
		Name of Contact Person	0
	RANFIE JIMENEZ/RVS TR	ANSPORT INC	
		Firm/ Company	/····································
	5901 AUGUSTA NATIONA		
		Address	
	ORLANDO/FIJ32822		
		City/ State and Zip Cod	e
	rvtransport2021@gmail.com		
	. 35	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	9234116
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	S43.75 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)
Am Div P.O	lling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations cntre of Tallahassec N. Monroe Street, Suite 810

Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation of

2022 OCT 19 AM 7: 34

SECRETALLA OF STATE TALLAHASSEE, FL

RVS TRANSPORT, INC

(Name of Corporation as curren		
(4)	tty filed with the Florida Dept, of Sta	te)
P21000	077669	
(Document Number	of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, thi Articles of Incorporation:	s Florida Profit Corporation adopts the	e following amendment(s
If amending name, enter the new name of the corporation:		
		The new
me must be distinguishable and contain the word "corporation," inc.," or Co.," or the designation "Corp," "Inc," or "Co". whartered," "professional association," or the abbreviation "P.A	A professional corporation name m	
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)		
		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		<u>1¢</u>
Name of New Registered Agent		
Traine of they register to rigeria		
(Florida s	treet address)	
(Florida s New Registered Office Address:	rtreet address) . Florid	9

Check if applicable

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

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>şv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>v</u>	VIVIANA RIVAS	5901 augusta national dr apt 214
Add			orlando fl 32822
x Remove			
2) Change			
Add			
Remove 3) Change	<u></u>		
Add			····
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
<u></u>	
f an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
- Pro Principality of Provided for the CACI	
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
if not applicable, indicate N/A)	
provisions for implementing the ame	
if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

10/13/2022	
he date of each amendment(s) adoption:, if other	er than
ate this document was signed.	
10/13/2022	
ffective date if applicable:	
(no more than 90 days after amendment file date)	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ocument's effective date on the Department of State's records.	sted as
doption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharehold action was not required.	ler
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	
100% by ."	
(voting group)	
10/13/2022	
Dated	
Signature Rufed	
(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)	
appointed nearth of the nationally	
RANFIE JIMENEZ	
(Typed or printed name of person signing)	-
PRESIDENT	
(Title of person signing)	