P21000078241

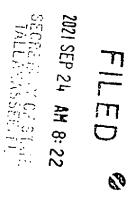
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Manuel Safe and Auto Carriers Inc
DOCUMENT NUMBER: P210000 78241
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Diana R Abrell
Name of Contact Person
1630 SW 112 Are
Migmi Fl 33157 City/ State and Zip Code
City/ State and Zip Code direct billing of a granil. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Digna Abreu at 786 325-4407 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
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

....

Manuel Safe and Auto C	arriers Inc		
(Name of Corporation as currently	filed with the Florida Dept. of State)		
P21000078241			
(Document Number of	Corporation (if known)		
	•		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the fol	lowing amendment	(s)
A. If amending name, enter the new name of the corporation:			
Manuel Fast Auto Carriers Inc	- -	The new	
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbre	viation "Corp "	
B. Enter new principal office address, if applicable:	nla	s > _	
(Principal office address MUST BE A STREET ADDRESS)	,	150 150 150	
			רו
C. Enter new mailing address, if applicable:	1	F: - [-
(Mailing address MAY BE A POST OFFICE BOX)	ox		
		<u> </u>	j
	,		
		· ;	~
			70
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the		
new registered agent and/or the new registered office address.	70/0		
Name of New Registered Agent	71/2		
(Florida stree	t address)		
New Registered Office Address:	771 - 7.1		
	ity) Florida	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the posit	tion,	
\checkmark	1/a		
		 -	
Signature of New Reg	istered Agent, if changing		
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	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove		nla	
2) Change		- MIA	
Add			
Remove 3) Change		***	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

avn uuumonai Sh	eets, if necessary). (Be specific)	
	71/a	
 -		
 -		
		···
		
amendment pro	ovides for an exchange, reclassification, or cancellation of issu	ied shares,
(if not applicable	menting the amendment if not contained in the amendment is indicate N/A)	tself:
	nla	
·	/1 K	
·		
		

The date of each amendment(s) adoption: 9/20/202
Effective date if applicable: 9/20/2021 (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 $9/20/202$
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)
(Typed or printed name of person signing)
President (Title of person signing)