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2022 SEP -7 PH 5: 37

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MYL TRANSPOR	RTINC	,
DOCUMENT NUM	BER: P22000007967		
The enclosed Articles	of Amendment and fee are su	bmitted for tiling.	
Please return all corre	spondence concerning this ma	tter to the following:	
	MANUEL RODRIGUEZ H	ERMOSILLA	
		Name of Contact Person	n
		Firm/ Company	
	1420 SE 26TH RD,		
		Address	
	HOMESTEAD, FL 33035		
		City/ State and Zip Cod	e
	lizyliliany@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
MANUEL RODRIG	UEZ HERMOSILLA	at (305	915-1393
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co	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

MYL TRANSPORT INC		·-
(Name of Corporation a	is currently filed with the Florida Dept. of State)	
P22000007967		
(Document	Number of Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	ntutes, this Florida Profit Corporation adopts the follo	wing amending
A. If amending name, enter the new name of the corpo	oration:	
MYL SUNSHINE INC		The nev
name must be distinguishable and contain the word "corpo" "Inc.," or Co.," or the designation "Corp." "Inc," or "chartered," "professional association," or the abbreviat	r "Co". A projessional corporation name musi co	viation "Corp., intain the work
B. Enter new principal office address, if applicable:	1420 SE 26TH RD	
(Principal office address MUST BE A STREET ADDRE	HOMESTEAD, FL 33035	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1420 SE 26TH RD	
(Mailing duaress hart ble A 1 Ost Oct ten box.	HOMESTEAD, FL 33035	·
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 offi	fice address:	
Name of New Registered Agent PINO FINANC	CIAL LLC	
1	(Florida street address)	
2721 SW 137 /	AVE STE 116 MIAMI Florida 33	175
New Registered Office Address: 2121 SW 1311	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a Signature	tered Agent: Im familiar with and accept the obligations of the posi In familiar with and accept the obligations of the posi In familiar with and accept the obligations of the posi In familiar with and accept the obligations of the posi In familiar with and accept the obligations of the posi	tion.
Check if applicable The amendment(s) is/are being filed pursuant to s. 60	97.0120 (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)

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			48.774.4
2) Change			
Add			
Remove 3) Change			
Add			4
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment provides fo	or an exchange,	reclassification,	or cancellation	of issued shares,	
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an amendment provides for covisions for implementing (if not applicable, indicat	<u>g the amendmer</u>	reclassification, at if not contain	or cancellation ed in the amend	of issued shares, ment itself:	
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	Iment(s) adoption: 08/29/2022	, if other than the
late this document was s	igned.	•
Effective date if applica	ble: 08/29/2022	
	(no more than 90 days after amendment file date)	
ote: If the date inserted ocument's effective dat	ed in this block does not meet the applicable statutory filing requirements, this date will e on the Department of State's records.	ll not be listed as the
doption of Amendme	nt(s) (CHECK ONE)	
The amendment(s) was action was not require	as/were adopted by the incorporators, or board of directors without shareholder action and	d shareholder
	as/were adopted by the shareholders. The number of votes cast for the amendment(s) vas/were sufficient for approval.	
	as/were approved by the shareholders through voting groups. The following statement covided 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	
by7		. 53
-, <u> </u>	(voting group)	2022 SEP -7
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Dated_	08/29/2022	
0.		
Signati	(By a director, president or other officer – if directors or officers have not been	 5
	selected, by an incorporator – if in the hands of a receiver, trustee, or other court	🛴 ယု
	appointed fiduciary by that fiduciary)	. 7
	MANUEL RODRIGUEZ HERMOSILLA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·