Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000099353 3)))



H220000993533ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : THE ELITE CARRIER SERVICES OF MIAMI LLC

Account Number : 120120000040 Phone : (305)405-2600 Fax Number : (305)405-2601

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

1				
トホスコー	Address:			

OZZMAR I 7 PM 2: ON FECRE BALLOT STATE TALLAHASSEE, FL

COR AMND/RESTATE/CORRECT OR O/D RESIGN NU-WAY EXPRESS INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

SIMMONS Help MAR 1 8 2022 TO: Amendment Section

COVER LETTER

Division of Cor	porations				
NAME OF CORPO	DRATION: NU-WAY EXPRE	ESS INC			
	18ER: P22000016920				
DOCUMENT NUM]BER;				
The enclosed Article	s of Amendment and fee are st	ibmitted for filing.			
Please return all corr	espondence concerning this me	atter to the following:			
	JENNY MEDINA				
		Name of Contact Person	n_		
	THE ELITE CARRIER SER	VICES OF MIAMI LLC			
		Firm/ Company			
	12060 NW SOUTH RIVER	DR			
		Address			
•	MEDLEY, FL 33178				
		City/ State and Zip Cod	t		
	YMEDINA@ELITECSOM.	сом			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se cali:			
		206			
JENNY MEDINA		at (³⁰⁵	405-2600		
· Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Piling Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ma	iling Address	Street A	Address		
	endment Section		ment Section		
	vision of Corporations). Box 6327		Division of Corporations The Centre of Tallahassee		
	lahassee, FL 32314		2415 N. Monroe Street, Suite 810		
	-	Tallahassee, FL 32303			

to

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

Articles of Amendment to Articles of Incorporation of

NU-WAY EXPRESS INC			
(Name of Corporation	n as currently	filed with the Florida De	pt. of State)
P22000016920			
(Docume	ent Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this I	Florida Profit Corporation (adopts the following amendment(s
A. If amending name, enter the new name of the cor	rporation;		
			The new
name must be distinguishable and contain the word "cor," Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A	ompany," or "incorporated professional corporation	" or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	9		
D. If amending the registered agent and/or registere.	nd office oddy	ner in Florida, anter the no	me of the
new registered agent and/or the new registered of			inc of the
Name of New Registered Agent		· · · · · · · · · · · · · · · · · · ·	<u> </u>
	Ælanida ama		
	(Florida stre	er aaaress)	
New Registered Office Address:		City)	, Florida <u>(Zip Code)</u>
New Registered Agent's Signature, is changing Regist I hereby accept the appointment as registered agent. I de	itered Agent: am familiar wi	ith and accept the obligation	ns of the position.
Signatu	ure of New Res	gistered Agent, if changing	
Check if applicable			

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>	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	P	BANOS A, LICIA	1006 NW 14TH ST
Add			FORT LAUDERDALE FL 33311
Remove 2) Change	P	ALICIA BOLANOS	1006 NW 14TH ST
X Add			FORT LAUDERDALE FL 33311
Remove 3) Change			
Add			
Remove 4) Change			
Add			
5) Change		_	
Add			
Remove 6) Change			
Add			
Damoua			

	if necessary).	(Be specific)	e(s) here:		
				.,	
					<u> </u>
		-			. =
for amondment necess	es for an excha	nge, reclassifica dment if not con	tion, or cancellation	on of issued share idment itself:	<u>s.</u>
provisions for implement (if not applicable, ind	dicate N/A)				
provisions for implemen	dicate N/A)				
provisions for implemen	dicate N/A)				
provisions for implemen	dicate N/A)				
provisions for implemen	dicate N/A)				
provisions for implemen	dicate N/A)				

	03/16/2022	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
03	/16/2022	
Essective date if applicable:	<u></u>	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CRECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action	n and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s sufficient for approval.)
	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
03/16/20: Dated	22	
Signature 🥩 🗘	1. Bolanos.	
selec	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	ALICIA BOLANOS	
	(Typed or printed name of person signing)	•
	PRESIDENT	
	(Title of person signing)	