## P22000054364

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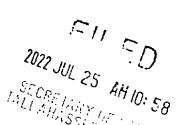
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: New Port Transportation Corp
DOCUMENT NUMBER: 122000054364
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Diana Abreu
Direct Permits & Hore
Firm/ Company 16350 SW 112 GVE
Miami Fl 33157
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address. (to be used for future annual report notification)
For further information concerning this matter, please call:
Diana Abreu 1,786,325 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 S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed)  S43.75 Filing Fee & S52.50 Filing Fee & Certificate of Status (Additional copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation



	of Milling the Secretary of AH 10:58
New Port Transportation	SYICOII
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
[220005436(	<u> </u>
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	1
	na
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	71/2
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office addre	<u>!ss:</u>
Name of New Registered Agent	na
(Florida :	street address)
	·
New Registered Office Address:	(City) , Florida (Zip Code)
	(Elp Coll)
New Registered Agent's Signature, if changing Registered Age	nt:
herehy accept the appointment as registered agent. I am familia	
	1
	na
· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • •
Signature of New	Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/arc 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)

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.

Example: 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	<u>Name</u>	<u>Addres</u> s
1) Change	<u>S</u>	Norma Charcape	36 chestnutst
X Add			Brooklyn, NY 11209
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	eets, if necessary).	(Be specific)		
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an amendment p	<u>rovides for an excl</u>	hange, reclassification, o	r cancellation of issued	shares,
rovisions for imp	lementing the ame	endment if not contained	<u>l in the amendment itse</u>	<u>lf:</u>
(if not applicab	ole, indicate N/A)	1		
		na		
		///	_	
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		-		<del></del>

. . .

The date of each amendment(s) adoption:, if other that date this document was signed.	n the
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 a document's effective date on the Department of State's records.	is the
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 7/20/2022 Signature Morias Pacie Willeron	
(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)	
Maria Gracia Camila Chacon Callern (Typed or printed name of person signing)	)
Title of person signing)	