## Paa00001012

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## **COVER LETTER**

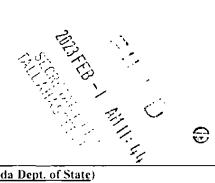
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Tallahassee, FL 32303

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Rude Bwoi Enterp	rise Inc		
	IBER: P22000067012			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Romain Thomas			
		Name of Contact Perso	n	
	Rude Bwoy Enterprise Inc			
	<u>`</u>	Firm/ Company		
	4980 SW 52ND ST STE 111	• •		
		Address		
	Davie, Fl 33314			
		City/ State and Zip Coo	le	
	Info@rudebwoytransportatio	n.com		
	•	sed for future annual repor	t notification)	
For further informati Romain Thomas	ion concerning this matter, pleas		334-7585	
Name of Contact Person		at ( 561 ) 334-7585  Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>M</u>	ailing Address	Street	Address	
	mendment Section	Amen	dment Section	
	vision of Corporations		on of Corporations	
	O. Box 6327		Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

## Articles of Amendment to Articles of Incorporation of



Rude Bwoi Enterprise Inc

( <u>Name c</u>	of Corporation as current	ly filed with the Florida Dept. of State)
P22000067012		
<u></u>	(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
Rude Bwoy Enterprise Inc		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	'orp," "Inc," or "Co"	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address,	if annlicable:	N/A
(Principal office address MUST BE A S		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A
	<del></del>	
D. If amending the registered agent an	id/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new	w registered office addres	<u>s:</u>
Name of New Registered Agent	N/A	
	(Florida st	reet address)
New Registered Office Address:	N/A	, Florida <sup>N/A</sup>
		(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		<u>E</u> with and accept the obligations of the position.
	Standard of No.	During A trans if the mains
	Signature of New I	Registered 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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change	-	N/A	N/A
Add			
Remove 3 ) Change		N/A	N/A
Add			
Remove			
4) Change		N/A	N/A
Add			
Remove			
5) Change		N/A	N/A
Add			
Remove			
6) Change		N/A	N/A
Add			
Remove			

Attach additional sheets	additional Articles, enter i, if necessary). (Be speci,	fic)			
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If an amendment prov	ides for an exchange, rech	assification, or canc	ellation of issued sha	res.	
provisions for implem	enting the amendment if	not contained in the	amendment itself:	<del></del>	
(if not applicable,	indicate N/A)				
/A					
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	01/29/2023	
The date of each amendment(s):	adoption:	, if other than th
late this document was signed.		
	24/2022	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the E	block does not meet the applicable statutory filing requirements, this department of State's records.	date will not be listed as th
adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	opted by the incorporators, or board of directors without shareholder ac	tion and shareholder:
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmen ufficient for approval.	nt(s)
must be separately provided for	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s): t for the amendment(s) was/were sufficient for approval	ment
Romain Thomas		
·	(voting group)	
select	director, president or other officer – if directors or officers have not bee ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)  Romain Thomas	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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