## P23 0000029944

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION:	NSUA TRANSPORT COI	RP	_		
DOCUMENT NUMBE		P2300002944		_		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspo	ondence concerning this ma	tter to the following:				
		Alan Martinez				
		Name of Contact Person	n			
		Simplex Group				
		Firm/ Company				
	7	500 NW 52ND ST, Suite 1	100	2023 SE		
_	<del>-</del>	Address		2023 NUG 16 AM SEALTE ARASSE		
		Miami FL 33166		G T		
	City/ State and Zip Code					
		permits@simplexgroup.	.net	SEF		
	E-mail address: (to be us	sed for future annual report		8. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		
				- A		
For further information	concerning this matter, pleas	se call:				
Edwin Armijo		at (	5998287	. <u></u>		
Name of	Contact Person	Area Co	ode & Daytime Telephone N	umber		
Enclosed is a check for t	the following amount made	payable to the Florida Dep	partment of State:			
■ \$35 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amen Divisi The C	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 8	10		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

INCLEA TO A MEDICAT CORP.

to

	INSUA TRANSI	OKICORP				
(Name of Corpo	oration as currently	filed with the Florida Dept	of State)			
	P2300000	)2944				
(D	ocument Number of	Corporation (if known)				
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	orida Statutes, this I	Florida Profit Corporation ad	opts the fo	llowing	amend	ment(s)
A. If amending name, enter the new name of t	he corporation:				<del>Ta</del> le s	ew
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," " "chartered," "professional association." or the a	'Inc," or "Co". A	ompany," or "incorporated" professional corporation no	or the abbi	Zoriation Boniain	Corp	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		451 SE 8TH ST LOT 90		AHA	16	
		HOMESTEAD FL 33030		385	포	
		<del></del>		T.F.	- <del>8</del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)	451 SE 8TH ST LOT 90		्षि र		_
		HOMESTEAD FL 33030				<u>.</u>
						_
D. If amending the registered agent and/or registered agent and/or the new registered.	gistered office addr ered office address:	ess in Florida, enter the nar	ne of the			
Name of New Registered Agent						
	451 SE 8TH	ST LOT 90				
<del></del>	(Florida stre	eet address)				
New Registered Office Address:	HOMESTEAD		, Florida_	3303	0	_
	(City)		(Zip Ce	ode)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agentials.	<u>2 Registered Agent:</u> ent I am familiar v	vith and accept the obligation	s of the po.	sition.		
	Signature of New Re	egistered 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)

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	Title	<u>Name</u>	<u>Addres</u> s
(Check One)  1) X Change	P	LORENA M LORENA M	451 SE 8TH ST LOFE 90
Add			HOMESTEAD RE 83030
Remove			HARY S
2) X Change	VP	JUAN C INSUA VAZQUEZ	451 SE 8TH ST 10 790 3
Add			HOMESTEAD FL 35030 2
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment provide	es for an evehance	reclassificatio	n, or cancellat	ion of issued sha	res,	
provisi <u>ons for implemen</u>	<u>iting the amendmen</u>	nt if not contai	ned in the am	endment itself:		
(if not applicable, ind	licate N/A)					
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The date of each amendment(s) ad	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment)	île date)
Note: If the date inserted in this bl document's effective date on the Dep	artment of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	ted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were sur	ted by the shareholders. The number of votes cast fo ficient for approval.	r the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the ar	following statement nendment(s):
"The number of votes cast to	or the amendment(s) was/were sufficient for approva	
by		2023 AUG SEGNERA TALLA
-, <u></u>	(voting group)	
	April 17th, 2023	₩ 6 F
Dated		SSE TO
Signature	haun	
(By a di selecteo	ector, president or other officer—if directors or office by an incorporator—if in the hands of a receiver, tru d fiduciary by that fiduciary)	ers have not been ristee, or other court
	LORENA M AS BANZO	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

. . .