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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: 195 TOWING & T	RANSPORT INC.		
DOCUMENT NUMB				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	oondence concerning this ma	tter to the following:		
	CARL PETERSON			
-	Name of Contact Person			
-		Firm/ Company		
-		Address		
-		City/ State and Zip Code		
•	C3pet2022@gmail.com			
-	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
		at (347	962,9039	
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for	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)	□\$52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

195 TOWING & TRANSPORT INC.	o Glad with the Floride Dent of State)
P23000025737	y filed with the Florida Dept. of State)
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this lits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	The new company, "or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the words
B. Enter new principal office address, if applicable:	ा । ज
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	A. T.
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If any Providence is a second of the seco	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Projectored Legal	
Name of New Registered Agent	
(Florida str	ert address)
·	·
New Registered Office Address:	, Florida (City) (Zip Code)
	•
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar w	
nereog accept the appointment as registered agent. I am jamtitar w	nin and accept the obligations of the position.
Signature of New Re	egistered Agent, if changing
Ch1-2f12 14	

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 Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
I) X Change	Р	CHRISTOPHER COLON	5310 GEORGIA AVE		
Add			WEST PALM BEACH, FL 33405		
Remove					
2) X Change		EDDIE ACEVEDO-MERCADO	5310 GEORGIA AVE		
Add			WEST PALM BEACH, FL 33405		
Remove 3) X Change	S	VICTOR A CASTILLO	5310 GEORGIA AVE		
Add			WEST PALM BEACH, FL 33405		
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach a	ling or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)
	· · · · · · · · · · · · · · · · · · ·
	·
f an an	endment provides for an exchange, reclassification, or cancellation of issued shares,
provisi	ons for implementing the amendment if not contained in the amendment itself:
(ij	not applicable, indicate N/A)
	<u></u>
	· · · · · · · · · · · · · · · · · · ·

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The date of each amendment(s) date this document was signed.	adoption:		, if other than the
Effective date <u>if applicable</u> :	(no more than 00 de	ys after amendment file date)	
	(no more man 91) day	is after amenament file date)	
Note: If the date inserted in this document's effective date on the I		statutory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were ac action was not required.	dopted by the incorporators, or board	d of directors without shareholder action and	shareholder
☐ The amendment(s) was/were as by the shareholders was/were	* =	mber of votes east for the amendment(s)	
	oproved by the shareholders through or each voting group entitled to vote	n voting groups. The following statement separately on the amendment(s):	
"The number of votes can	st for the amendment(s) was/were su	ufficient for approval	
by		·"	
•	(voting group)		
4/14/2023	3		
Dated	0	_	
Signature			
	director, president or other officer -	- if directors or officers have not been	
		nds of a receiver, trustee, or other court	
арроі	nted fiduciary by that fiduciary)		
	CHRISTOPHER COLON		
	(Typed or printed name	e of person signing)	
	PRESIDENT		
	(Title of person signing	g)	