Pa3000035737

(Requ	estor's Name)				
(Addre	ess)				
(Addre	ess)				
(City/S	State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Busin	ess Entity Nar	ne)			
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Fili	ng Officer:				

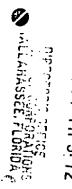




000412721210

S. CHATHAM

AUG 15 2023



RECEIVED

2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243	LES, INC
Please use funds from 120210000160: \$35. Authorization Signature: 195 Towing & Transport Inc. P23000025737 BUSINESS DOC#	00 fatul
Certified Copy of Articles of Organi	ization
Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Corp Not for Profit Officer/Director Limited Liability Domestication Other CORP LLP	XAmendment Resignation of R.A. or member Dissolution Change of Registered Agent Revocation of Dissolution Merger Conversion Amended and restated Articles Statement of Correction
OTHER FILINGS RE	EGISTERATION/QUALIFICATIONS
<u>Trademark</u> Annual ReportNOTARY REGISTRATION	Foreign filing
Fictitious Name	Limited Partnership Reinstatement
APOSTILLE Country	Other

EXAMINIER'S INITIALS:____



August 15, 2023

FLORIDA CAPITAL COURIER SERVICES, INC.

SUBJECT: 195 TOWING & TRANSPORT INC.

Ref. Number: P23000025737

We have received your document for I95 TOWING & TRANSPORT INC.. However, the document has not been filed and is being returned for the following:

You must submit the complete application to file the amendment.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Regulatory Specialist III Director's Office

Letter Number: 323A00018670



COVER LETTER

TO: Amendment Section

Division of Corporations	ŧ
NAME OF CORPORATION: 195 Tous DOCUMENT NUMBER: P230000	ing 8 Transport Inc.
The enclosed Articles of Amendment and fee are sub	mined for filing.
Please return all correspondence concerning this matter. Eddie	cevedo-Mercado
195	Name of Contact Person Towing and Transport Firm/Company
_ 5310 Geo West Pall	rgia Arif Address 1 BCOCh, FL 33405 City/ State and Zip Code
195 towing an E-mail address: (Who us	L trongo + Q gmail. Com ed for future annual report notification)
For further information concerning this matter, pleas	e cail:
Eddie Acevedo Mercad Name of Contact Person	at (5/6) 205 8/13 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & ☐\$52.50 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

195 Towing of Transport Inc.
(Name of Corporation as currently filed with the Florida Dent. of State)
P 230000 25737
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to the Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address if applicable: (Principal office address MUST BE A STREET ADDRESS) West Pain Beach FL
23405
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 address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent Eddie Acevedo Mercado
5310 Geogra Ave Florida street address)
relact Tolon Donaid
New Registered Office Address: VICST VOIM PCOLIN Florida 35405 (City) (City) (Zip Code)
·· ·
New Registered Agent's Signature, If changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
GID
Signature of New 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)

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

P = President; V = Vice President; I = Treasurer, S = Secretary, B = Director, Tr. Training, C = Character, Tr. Training, C = Character, Treasurer, 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.

Character to the Common Correctly John Doe is listed as the PST and Mike Jones is listed as the V. There is

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	PT	John Doe
X Remove	¥	Mike Jones
_X Add	SY	Sally Smith
Type of Action	Title	Name Address
(Check One) 1) Change	P	Eddie Acevedo 5310 Georgia Ave
Add		West Palm Beach, FL 33405
Remove 2) Change	<u>S</u>	Victor A castillo 5310 Georgia Ave
Add		West Palm Beach FL 33405
Remove 3) Change	<u>P</u>	Christopher colon 5310 Georgia Ave
Add Remove		West Palm Beach, FL 33405
4)Change		
Add		
Remove	.1 1 - 1	
Add		
Remove		en e
6) Change Add		
Remove	٠	

If amending or adding a (Attach additional sheets,	dditional Article	s, enter change	(a) here:			
(Attach additional sheets,	if necessary). (Be specific)				
		<u></u>				
				<u> </u>	_,	···
				-		
		<u> </u>				
<u>,</u>						
	<u> </u>					
		··············				
				<u>:</u>		
				f		
					•	
						-
F. If an amendment prov provisions for implem (If not applicable,	ides for an excha genting the amen indicate N/A)	nge, reclassific dment if not co	ation, or cancell ntained in the a	ation of issued st mendment itself:	HATCS.	
•		:				
					· · · · · · · · · · · · · · · · · · ·	
				·		
						

______.

The date of each amendment(s) addate this document was signed.	option:	if other than
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this ble document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this cartment of State's records.	late will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	sted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the amendment ricient for approval.	u(s)
	wood by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast:	or the amendment(s) was/were sufficient for approval	
by	(voling group)	
	(voling group)	
9/	2/2022	
Dated	3/2023	
Signature	800	
(By a di	rector, president or other officer - if directors or officers have not been	
	l, by an incorporator if in the hands of a receiver, trustee, or other co ed fiduciary by that fiduciary)	rurt
	Eddie Acevedo Mescado (Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	Vice President	
	(Title of person signing)	
•	-	

.

•