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From:			5
	Account Name	: FLEET & SMITH P.A.	
	Account Number	: 120020000170	
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COR AMND/RESTATE/CORRECT OR O/D RESIGN WT EXPRESS, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: WT Express Inc. P23000030394

DOCUMENT NUMBER:

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

H. Bart Fleet Name of Contact Person Fleet, Smith & Freeman F 1 . . . D 1023 JUH -5 AH 9: 50 Firm/ Company 1283 N. Eglin Parkway, Suite A Address Shalimar, FL 325779 City/ State and Zip Code bart@fleetsmithlaw.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (<u>850</u>) <u>651-4006</u> Area Code & Daytime Telephone Number H. Burt Fleet Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

S43.75 Filing Fee & Certificate of Status

□\$43.75 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

WT Express. Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P23000030394

(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 its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A The new name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "lnc.," or Co.," or the designation "Corp.," "lnc." 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:	1471 NW Taylor Street	·· 20
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	#46	
	Topeka, KS 66608	arnum 1
C. <u>Enter new mailing address, if applicable:</u> (Mailing address MAY BE A POST OFFICE BOX)	N/A	ASSE
		9.5

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	N/A		
		(Florida street address)	
New Registered Office Address:	N/A		Florida
		(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 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>X</u> Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
\underline{X} Add	<u>\$V</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	N/A		
Add			. <u></u>
Remove			2023
2) Change			The second secon
Add			A 1 4420
Remove 3) Change			
Add			ب <u>تاج</u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

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N/A								
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F. <u>If an amendme</u>	nt provides for a	n eschange rec	lassification or	cancellation of	issued shares			
nrovisions for	implementing th	a samendment if	not contained i	in the amendme	nt itself:			
Unot and	licable, indicate N	2/3)	norcomanicu	in me and munit	III HALII.			
(4) 7676 (1) 17	TELEVIL, TRAFFICIES,							

N/A

The date of each amendment(s) ac date this document was signed.	option:	if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date with our state of state's records.	II not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and	d shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) Ticient for approval.	
must be separately provided for	roved by the shareholders through voting groups. <i>The following statement</i> each voting group entitled to vote separately on the amendment(s): For the amendment(s) was/were sufficient for approval	2023 JUN -5 AM
by	(voting group)	2. 01 3
June 5, 2023 Dated		AH 9: 50
selected	ector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	<u></u>
	Fhomas E. Thomson	
	(Typed or printed name of person signing)	
1	resident	
-	(Title of person signing)	