## P23000054535

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: SUNSHINE AU	TO TRANSPO	ORT CO	RP
DOCUMENT NUMBE	R: P23000054535			
The enclosed Articles of	Amendment and fee are sub	omitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the followi	uā:	
		LEGUE	A DOLA	
_		Name of Cont		
	Name of Contact Person			
	SUNSH	IINE AUTO TF Firm/ Con		DRT CORP
				_
_		3747 66TH		
		Addre		
_		NAPLES, F		
		City/ State and	LZip Code	
	ī	DATALLC@0	GMAIL.C	COM
_	E-mail address: (to be us	ed for future ann	ual report	notification)
For further information	concerning this matter, pleas	se call;		
LESLIE GARCIA		at (	786	_)296 - 8169
Name of	Contact Person		Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Flo	orida Depa	ortment of State:
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filin Certified Cop (Additional co- enclosed)	- Dý	☐\$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		

## Article Artic

231/20
23 <sub>1/01/-5</sub>
'.,

	SUNSHINE AU	TO TRANSPORT CORP	", 4; Cs
(Name of	Corporation as curr	ently filed with the Florida Dept. of State)	
	P2	3000054535	
	(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.4 its Articles of Incorporation:	006, Florida Statutes, i	this Florida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new na	me of the corporation	<u>ı:</u>	
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co.," chartered," "professional association,"	orp," "Inc," or "Co"	," "company," or "incorporated" or the abbreviati ". A professional corporation name must contain P.A."	on "Corp.," In the word
B. Enter new principal office address, (Principal office address MUST BE A S.		3747 66TH AVE NE NAPLES, FL 3	<u>14120</u> .
			<del></del>
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		3747 66TH AVE NE NAPLES, FL	34120
			1 
D. If amending the registered agent agent agent agent and/or the new	nd/or registered office w registered office add	address in Florida, enter the name of the	°°°
Name of New Registered Agent	JOSE ANTONIO	BOSQUE ABRAU	_
	3747 66TH AVE		-
	·	da street address)	
New Registered Office Address:	NAPLES	(Cuy) , Florida 34120	) Code)
		1.77	0
			"⇔
New Registered Agent's Signature, if c	hanging Registered A	gent:	
I hereby accept the appointment as regis.	tered agent. I am fami	iliar with and accept the obligations of the position.	
	_ L   V /	lew Registered Agent, if changing	, mare
_	* Signature of N	еж кехізіегеа яхтіі, ў спачыть	
Check if applicable	20m 0100	(11) (a) F.S.	
Check if applicable  The amendment(s) is/are being filed p	pursuant to s. 607.0120	(11) (6), 1 .5.	۰

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>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u> </u>	LESLIE GARCIA	3747 66TH AVE NE NAPLES, FL 34120
Add			
X Remove			
2) Change	<u>P</u>	JOSE ANTONIO BOSQUE ABRAU	3747 66TH AVE NE NAPLES, FL 34120
<b>X</b> Add			
Remove Change	<b>-</b>		
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

E. <u>If amendi</u> (Attach <i>add</i>	ng or adding additio ditional sheets, if nece	nal Articles, enter essary). (Be specij				
Please. I n	eed iust remove	LESLIE GARC	IA and add JO	SE ANTONIO B	OSQUE ABRAU,	Thank vou
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F. <u>If an ame</u>	ndment provides for	an exchange, recla	assification, or can	cellation of issued :	shares,	
provision (if no	ns for implementing ot applicable, indicate	the amendment if ( · N/A)	not contained in th	<u>ie amendment itsel</u>	<u>f:</u>	
N/A	.,	,				
11/0						<del></del>
						<del></del>
		· · · · · · · · · · · · · · · · · · ·		<del></del>	<del></del>	

The date of each amendment(s) adoption: 11/02/2023  date this document was signed.	, if other than the
Effective date if applicable: 07/21/2023  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without sharehold	er action and shareholder
action was not required.	90
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	iment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(s	statement i):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 11/02/2023	
Signature	
(By/a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other	t been ier court
appointed fiduciary by that fiduciary)	
JOSE ANTONIO BOSQUE ABRAU	
(Typed or printed name of person signing)	08
PRESIDENT	<b>D</b>
(Title of person signing)	S. S