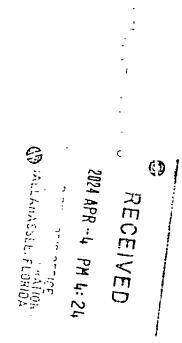
P24000019868

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Perishable Transpo	ort Service, Inc.		
DOCUMENT NUM	1BER: P24000019868			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	C/O Safety Department			
	Name of Contact Person			
	Perishable Transport Service.			
	·	Firm/ Company	, a	
	4545 SW 60th Avenue, Suite	, -		
		Address		
	Ocala, FL 34477			
		City/ State and Zip Cod	e	
	cufatu @ mariahahlatrana aan			
	safety@perishabletrans.com	sed for future annual report	natification	
For further informati Safety Department	on concerning this matter, pleas	966	760-5005	
Name	of Contact Person	at (Area Code & Daytime Telephone Number		
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 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		Amenc Divisic The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

à

Articles of Amendment to Articles of Incorporation

Perishable Transport Service, Inc.

(<u>Name</u>	of Corporation as currently	filed with the Florida De	pt. of State)	
P24000019868				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, this I	Horida Profit Corporation :	adopts the following	amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	Corp," "Inc," or "Co". A			
B. Enter new principal office address.	if applicable:			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			
C. Enter new mailing address, if appl				
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>)			
				;
D. If amending the registered agent ar	nd/or registered office addr.	ess in Florida, enter the na	ume of the	
new registered agent and/or the ne-			······································	1
Name of New Registered Agent	Tameka L. Boatwright			-
	111 North Orange Avenue,	Suite 800-01		•
	/Florida stre	et address)		•
<u>New Registered Office Address:</u>	Orlando		Florida 32801	۵.
HER NEGISIETU OJICE MAAIESS.		Cùyi	Zip Co	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligatio	ns of the position.	
1		, , , ,	,	
<u> </u>				
——————————————————————————————————————	7. Standard (2) 12	and the same of the same of		
()	Signature of New Re	gistered 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)

Example:

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	$\overline{\text{b.t.}}$	<u>John Doe</u>	
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
1) Change	P	Prentice J. Gillum	111 North Orange Avenue
Add			Suite 800-01
X Remove			Orlando, FL 32801
2) Change	P	Tameka L. Boatwright	111 North Orange Avenue
X Add			Suite 800-01
Remove 3) Change			Orlando, FL 32801
Add			
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)	
N/A	
V/1	
	 _
	 -
	<u>,</u>
. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	,
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
i/A	
	<u> </u>

	, if other than th
(no more than 90 days after amendment file date)	
	te will not be listed as th
(<u>CHECK ONE</u>)	
e adopted by the incorporators, or board of directors without shareholder actic	n and shareholder
	;)
	ent
cast for the amendment(s) was/were sufficient for approval	
;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	
(voting group)	
y a director, direction or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
Prentice J. Gillum	
(Typed or printed name of person signing)	,
President	
(Title of person signing)	
	this block does not meet the applicable statutory filing requirements, this date Department of State's records. (CHECK ONE) The adopted by the incorporators, or board of directors without shareholder action adopted by the shareholders. The number of votes cast for the amendment(state sufficient for approval). The approved by the shareholders through voting groups. The following statement of the action with a mendment(statement): The approved by the shareholders through voting groups. The following statement of the amendment(statement): The following statement of the amendment of the amend