## P Z40000 41300

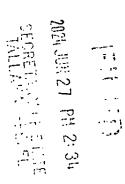
(Re	equestor's Name)	<del></del>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: AM EXPRESS TR	ANSPORT AND LOGIST	TICS INC	
	IBER:			_
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	ALIU B. ALAO			
		Name of Contact Person	n	<del></del>
	AM EXPRESS TRANSPORT	T AND LOGISTICS INC		
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
	9778 LOVAGE LN			크등
Address			一方衙	
JACKSONVILLE, FLORIDA 32219			,	
City/ State and Zip Code				
APLUSA1409@GMAIL.COM			Vint. Vint.	
	_	sed for future annual report	notification)	
				: ***
For further informati	on concerning this matter, pleas	se call:		
ALIU B. ALAO		at (	707- 5296	
Name of Contact Person Area Code & Daytime Telephone		umber		
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ar Di P.0	nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		10

## Articles of Amendment to Articles of Incorporation of

AM EXPRESS TRANSPORT AND LOG	GISTICS INC				
(Name o	of Corporation as currently	filed with the Florida De	pt. of State)		
P24000041300	•				
	(Document Number of	Corporation (if known)	•		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>I</i>	Florida Profit Corporation	adopts the follow	ing amendn	nent(s) to
A. If amending name, enter the new na	ime of the corporation:				
				·m	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" chartered," "professional association,"	Corp, " "Inc," or "Co". A				
B. Enter new principal office address,					
(Principal office address <u>MUST BE A S</u>	IKEET ADDKESS )				_
					•
C. Enter new mailing address, if appli					
(Mailing address <u>MAY BE A POST</u> )	<u>OFFICE BOX</u> )	<del></del>	<u>ي</u>	- 23	•
			<u> </u>	<u> </u>	, , , , , , ,
			( <del> 1</del> 7 7-<27		
					1
D. If amending the registered agent an new registered agent and/or the new			ame of the		
	ALIU B. ALAO		÷	v: 2:	•
Name of New Registered Agent		<del></del>		<u>-</u> 살	
				·n -	
	(Florida stre				
New Registered Office Address:	9778 LOVAGE LN, JACK	SONVILLE	, Florida		
	1	(City)	(Zij	p Code)	
N Daniera . I A a make the constant	n i ti Di ta i Aa i a				
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ons of the position	1.	
		,	•		
-				_	
	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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			SECRE!
Remove			
4) Change			
Add			
Remove			
5) Change		-	4 CT-18 CT-1
Add			
Remove			
6) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
My official name is ALIU B. ALAO. Please remove the "SR" from both registered agent nam	e and principal director name.
	-
···· · · · · · · · · · · · · · · · · ·	·
	· · · · · · · · · · · · · · · · · · ·
F. If an amendment provides for an exchange, reclassification, or cancellation of issued	shares.
provisions for implementing the amendment if not contained in the amendment itsel (if not applicable, indicate N/A)	<u>lC:</u>
(у пол аррисине, такие гол)	2
	5 20
	JUN 27
	27.7
	7 P
	P) 2:
	: 34
	m

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 90 days	after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the I	block does not meet the applicable solepartment of State's records.	tatutory filing requirements, th	nis 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.	lopted by the incorporators, or board of	of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were:	lopted by the shareholders. The numb sufficient for approval.	per of votes east for the amend	ment(s)
	proved by the shareholders through ver each voting group entitled to vote se		
"The number of votes cas	t for the amendment(s) was/were suff	icient for approval	
by	(voting group)		
06/24/202 Dated	4		
Signature	ob kformany		
select	director, president or other officer – if ed, by an incorporator – if in the hand nted fiduciary by that fiduciary)		
	ALIU B. ALAO		
	(Typed or printed name of	of person signing)	
	PRINCIPAL DIRECTOR		
	(Title of person signing)		
			POZILJUH 27 PN 2: 34 SEGRETARY SLATES STALL ARASSASSISTER

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