## P24000043896

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DD TRANSPORT	CORP			
	BER: P24000043896				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	ALFREDO DELGADO DEI	.GADO			
		Name of Contact Pe	rson		
	DD TRANSPOT CORP				
		Firm/ Company			
	4420 HEDGE DR S				
	Address				
	LAKELAND, FL 33812				
	·	City/ State and Zip (	Code		
	alfredod0971@gmail.com				
	E-mail address: (to be us	sed for future annual rep	ort notification)		
For further information	on concerning this matter, pleas	se call:			
ALFREDO DELGA	DO DELGADO	at (	284-3970		
Name	of Contact Person	Area	Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida D	Department of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	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		Am Div	eet Address endment Section ision of Corporations Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) (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: 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." ALFREDO DELGADO DELGADO B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) 4420 HEDGE DR S LAKELAND, FL 33812 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 (Florida street address) New Registered Office Address: . Florida 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.

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)

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>b,l,</u>	John Doe	
$\underline{X}$ 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) X Change	PRES	ALFREDO DELGADO DELGA	ADO 4420 HEDGE DR S
Add		<del></del>	LAKELAND, FL 33812
Remove			
2) Change	AP	YOSVANYS REYES DRIGG	2113 TIMBERCREEK LOOP E
Add			LAKELAND, FL 33805
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
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If an amendment pro provisions for imple (if not applicable	ovides for an exchangementing the amendmenting the indicate N/A)	e, reclassification, or tent if not contained	cancellation of issuing the amendment	ied shares, itself:	
		<del></del>		<del> </del>	
•					
	<del>-</del>				
	<del>.</del>				

The date of each amendment date this document was signed	(s) adoption:	, if other than the
Effective date if applicable:	AUGUST 13, 2024	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in t document's effective date on the	his block does not meet the applicable statutory filing requirements, this date to Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
☐ The amendment(s) was/wer must be separately provide.	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	2024 AUS 19
by		<u>ئىن</u> .
	(voting group)	<del>'</del>
$_{ ext{Dated}}$ $oldsymbol{eta}$	-13-2024 A	All Ti
Signature	At-	·
(By sel	radirector, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Affredo Oslagdo Dulgado (Typed or printed name of person signing)	
	PrecideNT	
	(Title of person signing)	