# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000402297 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TAX 5 PRO CORP Account Number : I20200000147 Phone : (786)307-2733 Fax Number : (954)420-7118

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## INFO@TAXSPRO.COM

भर करेतु १०० व्यक्ति महिन्दु हेर्नु हे

## COR AMND/RESTATE/CORRECT OR O/D RESIGN A & N READY CARGO EXPRESS CORP

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

J.DENNIS 12.06.24

Electronic Filing Menu

Corporate Filing Menu

Help

## **COVER LETTER**

From: +19544207118 (FAX 5 PRO)

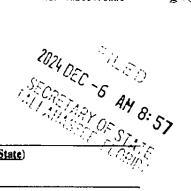
TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: A & N READY C	ARGO (EXPRESS CORP	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUM	BER:		
	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	ANWAR I PUELLO		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	n
	TAXS PRO CORP		
		Firm/ Company	
	8030 PINES BLVD		
		Address	
	PEMBROKE PINES, FL 33	024	
		City/ State and Zip Cod	e
	INFO@TAXSPRO.COM		
	E-mail address: (to be us	sed for future annual report	notification)
	n concerning this matter, pleas		
ANWAR I PUELLO		at (	_) 3072733
Name (	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depi	artment of State:
S35 Filing Fee	☐ \$43.75 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

O

#### Articles of Amendment to Articles of Incorporation of

From: +19544207118 (TAX S PRO)



#### A & N READY CARGO EXPRESS CORP.

THE THEAD! CARGO EXTRESS CORT	146 GS7
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P24000045824	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Si its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	poration:
name must be distinguishable and contain the word "	The new poration," "company," or "incorporated" or the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevia	or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRI</u>	(ESS)
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	1
(Manual and es <u>MAI BE A 1031 0111CE BOX</u> )	
D. If amending the registered agent and/or registered	d office address in Florida, enter the name of the
new registered agent and/or the new registered off	Tice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	tered Agent:
nereoy accept the appointment as registered agent. I as	am familiar with and accept the obligations of the position
Signatui	re 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.

Example:

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:

From: +19544207118 (TAX 5 PRC)

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	PT	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
l) Change	Р	giron tosta, Nathalie	9807 NW 88th teπ	
Add			doral, fi 33178	
X Remove				
2) Change	VP 	lora olivares, Alfrid M	9807 NW 88th ter	
Add			Doral, Fl 33178	
x Remove			9807 NW 88th Terr	
3) Change	p	Lora Olivares, Alfrid M	Doral, Fl 33178	
X Add				
Remove				
4) Change	VP	Giron Tosta, Nathalie	9807 NW 88th Terr	
X Add			Doral, Fl 33178	
Remove				
5) Change				
Add				-
Remove				
6) Change				•
Add				
Remove				

	ng or adding additional Ar litional sheets, if necessary).	(Be specific)			
		<del></del>			
				<u> </u>	
		<u></u>			
					<del></del>
		<u></u>			-
	,	<del></del>			
	·				
<del></del>		<del></del>		<del></del>	
		<u></u>			
<del></del>			· · · · · · · · · · · · · · · · · · ·		
			<del></del>		
•				<del>-</del>	
			<u></u>		
provisions	dment provides for an exc for implementing the ame applicable, indicate N/A)	hange, reclassifi endment if not c	cation, or cancellate ontained in the am	ion of issued shares endment itself:	,
(if not					
(if not					
(if not					
(if not					
(if not					
(if not					

date this document was signed.

Effective date if applicable:

Adoption of Amendment(s)

action was not required.

(3)

12/06/2024

President

Dated

Signature

(Typed or printed name of person signing)

(Title of person signing)