## P95 000076635

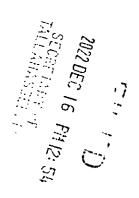
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	WING AND TRANSPOR	TATION, INC.
DOCUMENT NUMB	P95000076635 ER:		· · · · · ·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JUAN HERRERA		
	SPECIALIZED TOWING AT	Name of Contact Person ND TRANSPORTATION,	
-		Firm/ Company	
	14825 SW 137 ST. #3	• •	
	MIAMI, FL 33196	Address	
		City/ State and Zip Cod	e
	JUANH@SPECIALIZEDTO	WINGFL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
JUAN HERRERA		305 at (	986-1642
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & 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 Tallahassee, FL 32314		Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SPECIALIZED TOWING AND TRANSPORTATION, INC.

at of State).

(Name of Corporation as currently filed with the Florida Dept. of Staté) 95000076635 (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: 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. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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.

Øß

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	<u>v</u>	Mike Jones					
X Add	<u>\$V</u>	Sally Smith					
Type of Action	<u>Title</u>		Name	Address			
(Check One) X	TS		RIGOBERTO HERRERA	PO BOX 14-3941			
1) Change		_		CORAL GABLES, FL 33114			
Add							
Remove							
2) Change		<del></del>	·				
Add							
Remove							
3 ) Change	<del></del>	_					
Add							
Remove							
4) Change		_					
Add							
Remove							
5) Change		_					
Add							
Remove							
6) Change							
Add							
Remove							

If amen (Attach	ing or adding additional Articles, enter change(s) here: lditional sheets, if necessary). (Be specific)	
Alu		
10.10		
-		. <u></u>
lf an ar	endment provides for an exchange, reclassification, or cancellation of issued shares,	
provis (if	ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)	
 مالد		
NA		
		· · · · · ·
	<del> </del>	

•

date this document was signed. 12/13	option:, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
12/13/2022	
Dated	
Signature	
(By a dir	rector, president or other officer - if directors or officers have not been
	, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)
• •	UAN HERRERA
-	(Typed or printed name of person signing)
ŀ	PRESIDENT
-	(Title of person signing)