

P98000021950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

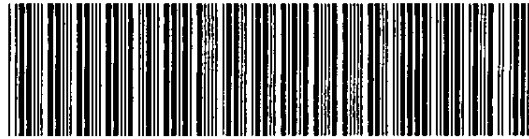
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
11 MAY 12 AM 11:57
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

725-12-11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 5, 2011

JUAN A. SUAREZ
SAFE TRANSPORTATION INC
3030 SW 106 AVE
MIAMI, FL 33165

SUBJECT: SAFE TRANSPORTATION, INC.
Ref. Number: P98000021950

We have received your document for SAFE TRANSPORTATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please clarify the nature of business. What are you changing the nature of business to read.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 511A00011097

RECEIVED
11 MAY 12 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SAFE TRANSPORTATION, INC

DOCUMENT NUMBER: P98000021950

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN A SUAREZ

Name of Contact Person

SAFE TRANSPORTATION INC

Firm/ Company

3030 SW 106 AVE

Address

MIAMI, FLORIDA 33165

City/ State and Zip Code

lillian.suarez@ymail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan A Suarez

Name of Contact Person

at (305)

216-8860

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

SAFE TRANSPORTATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P98000021950

(Document Number of Corporation (if known))

FILED

11 MAY 12 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

FLORIDA NETWORK SERVICES INC

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."

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:

New Registered Office Address:

(Florida street address)

(City)

(Zip Code), 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

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	ALBERTO SUAREZ	3030 SW 106 AVE MIAMI FLORIDA 33165	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
SCRT	GISELLE SUAREZ	3030 SW 106 AVE MIAMI, FLORIDA 33165	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

THIS CORPORATION IS AMENDING THE NATURE OF THE BUSINESS FROM TRA
SERVICES FOR FLORIDA STATES

New and additional services in the nature of the business are: marketing, counseling medical services to Doctors, Therapy Centers as x-ray MEI including transportation of the Patients to those in the network. (Advertising).

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 itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: APRIL 27, 2011
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated APRIL 27, 2011

Signature _____

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JUAN A SUAREZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)