543299

(Requestor's Name)
(Address)
(Address)
(Cit. (Cit.), (Cit.), (Cit.)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600041842186

11/01/04-01031-024 **43.75

G. Coulleto NOV 1 8 2004

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION:	WRAP_IT	TRANSI	r, inc	=1	
DOCUMENT NUN	IBER:	S43299		······································		
The enclosed Article	oc of Amoni	<i>lment</i> and fee as	re submitted	I for filing.		
Please return all cor	reśpondenci	concerning thi	s matter to t	he following:		
	Marth	a Lucia Ca	quimbo	can)		-
		(Manuc C	or Comact rea	sony		
T.T.	RAP IT T	RANSIT, IN	i.c			
	OL II I		m/ Company)		"3." " · · · · · · · · · · · · · · · · ·	٠
-	2033	West 62nd	Street			
			(Address)			
	HIALEA	H, FL 3301	6			
· · · · · · · · · · · · · · · · · · ·		(City/ St	tate/ and Zip C	'ode)		- -
For further informat	ion concern	ing this matter,	please call:	- 4-		
Martha L	Caquimb	0	at (:	305) 364	-9099	
(Name of Contact Person)				Area Code & Day		lumber)
Enclosed is a cheek	for the falk	owing amount:			-	
□ \$35 Filing Fee		Filing Fee & ate of Status	Certi (Ada	75 Filing Fee & iffed Copy litional copy is dosed)	Certi Certi (Add	60 Filing Fee ficate of Status fied Copy litional Copy nelected)
	ing Addres		<u></u>	Street Address Amendment S		

Division of Corporations 409 F. Gaines Street

Tallahassee, FL 32399

Division of Corporations

Tallahassee, Fl 30314

P.C. Box 6327



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 9, 2004

MARTHA L. CAQUIMBO WRAP IT TRANSIT, INC. 2033 WEST 62ND ST. HIALEAH, FL. 33016

SUBJECT: WRAP-IT TRANSIT, INC.

Ref. Number: S43299

We have received your document for WRAP-IT TRANSIT, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

This is not an Alien Business organization, you submitted the form for a change of agent for that type of entity. You need to simply have the acceptance paragraph with the signature on your amendment document.

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) 245-6903.

Cheryl Coulliette Document Specialist

Letter Number: 304A00064100

Articles of Amendment to Articles of Incorporation

WRAP IT TRANSIT, INC

(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	
Purcuant to the provisions of section 607 1006. Florida Statutes, this Florida Profit Corneration	
adopts the following amendment(s) to its Articles of Incorporation:	
NEW CORPORATE NAME (if changing):	
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
Officer/Director:	·
orlando Ospina P 2033 West 62nd St. Hialeah, FL 33016 DELETED	
onica C Ospina VP 2033 West 62nd St. Hialeah, FL 33016 DELETH	§D
artha Lucia Caquimbo P 2033 West 62rd St. Hialeah, FL 33016 A) [[E
egistered Agent:	
rlando Ospina 2033 West 62nd St. Hialeah, FL 33016 DELETED	
artha Lucia Caquimbo 2033 West 62nd St. Hialeah, FL 33016 ADD	ED
(Attach additional pages if necessary)	

Articles of Amendment

WRAP TRANSIT, INC

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

Martha Lucia Caquimbo

The date of each amendment(s) adoption: 10/26/2004
Effective date if applicable: 11/01/2004 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved 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.
Signed this 26 day of October , 2004. Signature Aland Comments
(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, trustec, or other court appointed fiduciary by that fiduciary)
ORLANDO OSPINA
(Typed or printed name of person signing)
PRESIDENT/DIRECTOR
(Title of person signing)

FILING FEE: \$35