P170000 24663

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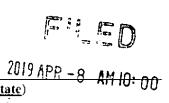
TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: OZARK TRAIL TRUCK COMPANY DOCUMENT NUMBER: P17000024603 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RICHARD C GROB Name of Contact Person **OZARK TRAIL TRUCK COMPANY** Firm/ Company 10006 RIVERVIEW DR Address RIVERVIEW FL. 33578 City/ State and Zip Code GROBSTIEN@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (941) 270 - 0220
Area Code & Daytime Telephone Number RICHARD C GROB Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



OZARK TRAIL TRUCK COMPANY

(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
	Language Commence of the Comme
(Document Num	iber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporatio	un:
OZARK TRAIL TRUCK COMPANY INC	The new
	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
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 new registered agent and/or the new registered office ad-	
Name of New Registered Agent	
(Flori	ida street address)
New Registered Office Address:	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam.	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office adented Name of New Registered Agent (Flori New Registered Office Address: New Registered Agent's Signature, if changing Registered A l hereby accept the appointment as registered agent. I am fam.	ida street address), Florida (City) (Zip Code) Agent:

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 Do		
X Remove	<u>v</u>	Mike Jo		
X Add	<u>SV</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		-		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
OZARK TRAIL TRUCK COMPANY INC
OZAKK TRAIL TROCK COMPANT INC
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)
N/A
- · · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: date this document was signed.	, if other than the
· ·	
Effective date if applicable: (no more than 90 days after amendment file date)	-,
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, thi document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
RICHARD C GROB	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareh action was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	г
04/03/2019	
Signature Archand Live	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	een court
RICHARD C GROB	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	