P21000052036

(R	equestor's Name)	<u> </u>	
(A	ddress)		
(A	ddress)		
(C	ity/State/Zip/Phone #)	
PICK-UP	TIAW	MAIL	
(B	usiness Entity Name)	
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to	Filing Officer:		
L	<u>.</u>	J	





600413055606

07/31/23--01017--021 **43.75

THE THE STATE STATE

COVER LETTER

Division of Corporations NAME OF CORPORATION: Dt Crane Services Inc **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Darrin Cavalletti Name of Contact Person DT Crane Service Inc Firm/ Company 21771 NE Hwy 27 Address Williston/Florida 32696 City/ State and Zip Code wstruck3279@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (352) 529-7100

Area Code & Daytime Telephone Number Darrin Cavalletti Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$52.50 Filing Fee ☐\$43.75 Filing Fee & **\$43.75** Filing Fee & ☐ \$35 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

TO: Amendment Section

Tallahassee, FL 32314

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

DT Crane Service Inc			
(Name o	f Corporation as curren	tly filed with the Florida Dept. of State)	
P21000052036			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbrevial A professional corporation name must conto	tion "Corp."
		21771 NE Hwy 27	
B. Enter new principal office address, (Principal office address MUST BE A S	TREET ADDRESS)	Williston, Florida 32696	
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		21771 NE Hwy 27	
		Williston, Florida 32696	
D. If amending the registered agent an new registered agent and/or the ne	w registered office addre	dress in Florida, enter the name of the	= 2
Name of New Registered Agent	Christy Cavalletti		- 구결 호
	21771 NE Hwy 27		·
	(Florida :	street address)	
New Registered Office Address:	Williston	32696 , Florida	<u></u>
		(City) (Zi	p Code)
New Registered Agent's Signature, if so I hereby accept the appointment as regis	thanging Registered Age tered agent. I am familia	r with and accept the obligations of the position 7	2.
(Jus	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.

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)

Example:

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 = ChiefExecutive 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Trinity J Sanders	18060 NW 150th Street
Add			Williston, Florida 32696
Remove 2) Change	p	Darrin Cavalletti	21771 NE Hwy 27
X Add			Williston, Florida 32696
Remove 3) Change	VP	Darrin Cavalletti	18060 NW 150th Street
Add			Williston, Florida 32696
X Remove	VP	Christy Cavalletti	21771 NE Hwy 27
4) Change X Add			Williston, Florida 32696
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artic attach additional sheets, if necessary).	(Be specific)	
		SECKE STATE
		سة <u>101</u> ب <u>2</u> 012
f an amendment provides for an each	ange, reclassification, or cancellation of issued shares,	SAL SALES
provisions for implementing the amen	ndment if not contained in the amendment itself:	9
(if not applicable, indicate N/A)		
		- <u> </u>
		43
		THE THE
		
_		

The date of each amendment(s) addate this document was signed.	loption:		, if other than the
Effective date if applicable:			
Enterne date in approximation.	(no more than 9	00 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the appli partment of State's records.	cable statutory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add action was not required.	pted by the incorporators, or	board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su		ne number of votes cast for the amendment(s)	
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders the each voting group entitled to	rough voting groups. The following statement vote separately on the amendment(s):	u
"The number of votes cast	for the amendment(s) was/w	ere sufficient for approval	
by	(voting group)	<u> </u>	
Dated TULY	27 2023		
Signature	THE W COURS		
selecto	irector, president or other off d, by an incorporator – if in t ted fiduciary by that fiduciary	icer if directors or officers have not been the hands of a receiver, trustee, or other court ()	
	Darrin Cavalletti		2027 3E
	(Typed or printed	name of person signing)	ALU Jul
	President		<u> </u>
	(Title of person s	igning)	FH 2: 48