

P2200000 35639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

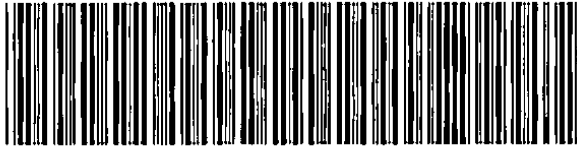
(Document Number)

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Amend

900399005029
12/22/22--01003--016 **35.00

2022 DEC 22 AM 11:34

FILED

A. RAMSEY
DEC 22 2022

FALLAHASSE, FLORIDA

2022 DEC 22 AM 10:29

RECEIVED

COVER LETTER

D: Amendment Section
Division of Corporations

NAME OF CORPORATION: TRUCK & TRAILER MOBILE REPAIR INC

DOCUMENT NUMBER: P22000038639

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

Please return all correspondence concerning this matter to the following:

LUIS E MUNOZ

Name of Contact Person

Firm/ Company

1532 QUINTA ROAD

Address

KISSIMMEE, FLORIDA 34744

City/ State and Zip Code

FASTSERVICESREPAIR@GMAIL.COM

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

For further information concerning this matter, please call:

LUIS E MUNOZ at (689) 7803723

Name of Contact Person 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
 The Centre of Tallahassee
 2415 N. Monroe Street, Suite 810
 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2022

LUIS MINOZ
1532 QUINTA ROAD
KISSIMMEE, FL 34744

SUBJECT: TRUCK & TRAILER MOBILE REPAIR INC
Ref. Number: P22000038639

We have received your document for TRUCK & TRAILER MOBILE REPAIR 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):

This amendment can not be filed until after the revocation of dissolution is filed since the corporation is not active at this time.

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) 245-6823.

Annette Ramsey
OPS

Letter Number: 622A00028677

www.sunbiz.org

Articles of Amendment
to
Articles of Incorporation
of

FILED

2022 DEC 22 AM 11:34

TRUCK & TRAILER MOBILE REPAIR INC

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

P22000038639

(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:

If amending name, enter the new name of the corporation:

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."

Enter new principal office address, if applicable:
Principal office address MUST BE A STREET ADDRESS

1533 Barberrry dr.
Kindred FL 34744

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1538 Barberrry dr.
Kindred FL 34744

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: _____

(City)

_____, Florida

(Zip Code)

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.

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. For example, 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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
<input type="checkbox"/> Change	<u>P</u>	<u>BRAULIO J MATA</u>	<u>2212 GRAND CAYMAN CT APT</u>
<input type="checkbox"/> Add			<u>APT 1625</u>
<input checked="" type="checkbox"/> Remove			<u>KISSIMMEE, FL 34741</u>
<input checked="" type="checkbox"/> Change	<u>P</u>	<u>LUIS MUNOZ</u>	<u>111 E MONUMENT AVE</u>
<input type="checkbox"/> Add			<u>SUTE 412</u>
<input type="checkbox"/> Remove			<u>KISSIMMEE, FL 34741</u>
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

12/17/2022

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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, this date will not be listed as the document's effective date on the Department of State's records.

Option of Amendment(s) (CHECK ONE)

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

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)

12/17/2022
Dated _____

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)

LUIS E MUNOZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)