P23000064960

| (F | Requestor's Name) | |
|-------------------------|----------------------|-------------|
| (F | Address) | |
| (<i>f</i> | Address) | |
| | | -: |
| (C | City/State/Zip/Phone | : #) |
| PICK-UP | ☐ WAIT | MAIL |
| (E | Business Entity Nam | ne) |
| | | |
| (C | Pocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | o Filing Officer: | |
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Office Use Only



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11/17/23--01014--021 **85.00





December 6, 2023

RONIEL HERNANDEZ LOPEZ 1781 WOODHAVEN DR WEST PALM BEACH, FL 33406

SUBJECT: ASHLEY TRUCKING OF THE PALM BEACHES CORP

Ref. Number: P23000064960

We have received your document for ASHLEY TRUCKING OF THE PALM BEACHES CORP 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 ensure that you check one of the adoption of amendment boxes, as well as date and sign the last page.

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) 245-6050.

Letter Number: 323A00027828

Morgan E Lovett Regulatory Specialist II

COVER LETTER

TO: Amendment Section Division of Corporations Ashley Trucking of the Palm Beaches Corp NAME OF CORPORATION: P23000064960 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Roniel Hernandez Lopez Name of Contact Person Ashley Trucking of the Palm Beaches Corp Firm/ Company 1781 Woodhaven Dr Address West Palm Beach / FL /33406 City/ State and Zip Code hernandezronier980@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Roniel Hernandez Lopez Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee S35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Ser

Amendment Section Division of Corporations The Centre of Tallahassee

is enclosed)

Articles of Amendment to Articles of Incorporation of

| (Name | of Corporation as currentl | y filed with the Florida Dept. of State |) |
|--|---------------------------------|--|--|
| | (Document Number of | f Corporation (if known) | |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corporation adopts the f | ollowing amendment(s) |
| A. If amending name, enter the new na | ame of the corporation: | | |
| | | | The now |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association," | Corp, '' "Inc,'" or " Co ". A | company," or "incorporated" or the abb professional corporation name must | reviation "Corp.," contain the word |
| B. Enter new principal office address, | if applicable: | 1781 Woodhaven Dr | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | Palm Springs / FL / 33406 | |
| C. Enter new mailing address, if applicable: | | 1781 Woodhaven Dr | |
| (Mailing address MAY BE A POST) | OFFICE BOX) | | |
| | | Palm Springs / FL / 33406 | |
| | | | 2 |
| D. If amending the registered agent an new registered agent and/or the new | | | €- • |
| Name of New Registered Agent | Ronier Hernande | ez Lopez | · - |
| | 1781 Woodhaven Dr | | : |
| | (Florida stre | ret address) | |
| New Registered Office Address: | Palm Springs | , Florida | 33406 |
| | | (Cup) | (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

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 | 171 | John Doc | |
|----------------------------|-----------|---------------------------|---------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) X Change | P | Ronier Hernandez Lopez | 1781 Woodhaven Dr |
| Ad d | | | Palm Springs / FL / 33406 |
| Remove | | | |
| 2) Change | | Lisandra Sanchez Martinez | 1781 Woodhaven Dr |
| _X_ Add | | | Palm Springs / FL / 33406 |
| Remove Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | <u>-</u> |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| f an amendment provides for an exchange, reclassification, or cancellation of issued shares, | |
|--|--|
| provisions for implementing the amendment if not contained in the amendment itself: | |
| provisions for implementing the amendment if not contained in the interminent user. | |
| (if not applicable, indicate N/A) | |

| The date of each amendment(s) addate this document was signed. | option: | , if other than the |
|---|---|------------------------|
| | | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bl document's effective date on the De | ock does not meet the applicable statutory filing requirements, this date will partment of State's records. | I not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were ado action was not required. | nted by the incorporators, or board of directors without shareholder action and | l shareholder |
| ☑ The amendment(s) was/were adopty the shareholders was/were sull. ☐ The amendment(s) was/were adopty the shareholders. ☐ The amendment(s) was/were | nted by the shareholders. The number of votes cast for the amendment(s) Ticient for approval. | |
| | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes east f | or the amendment(s) was/were sufficient for approval | |
| hy | (voting group) | |
| | (voting group) | |
| Dated12 /14 | /2023 | |
| Signature | RIL | |
| selected | by an incorporator – if in the hands of a receiver, trustee, or other court | _ |
| appointe | d fiduciary by that fiduciary) | 7 ; |
| | Roview Hernandez Lopez (Typed or printed name of person signing) | |
| - | (Typed or printed name of person signing) | |
| | President | ., \ |
| | (Title of person signing) | <u>:</u> |
| | | |
| | | <u>.</u> |