## 648160

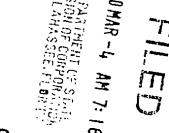
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MAR 23 2020 S. YOUNG

## COVER LETTER

**TO:** Amendment Section Division of Corporations

RATION:	CUCKERS, INC			
BER:				
	bmitted for tiling.			
espondence concerning this ma	tter to the following:			
ENOLA WOLFINGER				
	Name of Contact Persor	1		
AMERICAN ACCOUNTING	3			
	Firm/ Company			
4509 BEE RIDGE RD SUI	•			
	Address			
SARASOTA, FL 34233				
	City/ State and Zip Code	e		
	041	371-0008		
of Contact Person	at ( ) Area Code & Daytime Telephone Number			
□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Street Address			
nendment Section	Amendment Section			
•	Division of Corporations			
), Box 6,327 Hahnsene, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
	BER: 648160  Standard and fee are surespondence concerning this mater.  ENOLA WOLFINGER  AMERICAN ACCOUNTING  4509 BEE RIDGE RD SUI  SARASOTA, FL 34233  E-mail address: (to be use on concerning this matter, please on concerning this matter, please on the following amount made and set of Status  S43.75 Filing Fee & Certificate of Status  ailing Address mendment Section evision of Corporations O. Box 6327	ENOLA WOLFINGER    Name of Contact Person		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

I٨	JTF	RS	STA	TF	TRI	ICI	KFF	รร.	INC

INTERSTATE TRUCKERS, INC				
(Name (	of Corporation as currently	filed with the Florida Dept.	of State)	
648160				
	(Document Number of O	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this $F$	lorida Profit Corporation ad	opts the following amendn	nent(s)
A. If amending name, enter the new na	ime of the corporation:		The ne	' <b>11</b> 1'
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	"orp," "Inc," or "Co". A	mpany," or "incorporated" ( professional corporation na	or the abbreviation "Corp	,
B. Enter new principal office address, (Principal office address MUST BE A S		N A		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u> )	i <u>cable:</u> OFFICE <u>BOX</u> )	NIA	2020 HAR -4 AM 7: 16	
D. If amending the registered agent ar new registered agent and/or the new		ss in Florida, enter the nan		
Name of New Registered Agent	BRENT LOUISO			
	16053 MYAKKA ROAD		<del></del>	
	(Florida stree	address)	<del></del>	
V 0 1 100 111 .	SARASOTA		34240	
New Registered Office Address:	10	'ityi	, Florida (Zip Code)	
New Registered Agent's Signature, if e I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar wi	ith and accept the obligations	s of the position.	
	Signature of New Rey	zistered Agent, if changing	<u> </u>	

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)

Please note the officer director title by the first letter of the office title:

 $P \sim President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held President, Treasurer, Director would be PTD.$ 

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>12T</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	MARTIN E LOUISO	16053 MYAKKA RD
Add			SARASOTA, FL 34240
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<del></del>
Add			
Remove			

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an amendment prov	ides for an exchange,	reclassificatio	n, or cancellatio	n of issued share	<u>S</u> ,
rovisions for implen	nenting the amendme	nt if not conta	<u>ined in the amen</u>	<u>dment itself:</u>	
(if not applicable,	mateate N/A)		1.		
			A		
			117	·	
	<u></u>				

•

The date of each amendment(s) adoption: date this document was signed.	12	30	19		, if other than the
Effective date <u>if applicable</u> :	(no more	than 90 a	lays afte.	r amendment file c	date)
Note: If the date inserted in this block does document's effective date on the Department			le statut	ory filing require	ments, this date will not be listed as the
Adoption of Amendment(s) (Q	HECK ONE	()			
☐ The amendment(s) was/were adopted by the action was not required.	ie incorporato	ors, or boa	ard of di	rectors without sh	areholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for	ne shareholder or approval.	rs. The n	umber o	f votes east for the	e amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voti	the sharehold ng group entit	ers throug	gh votin te separa	g groups. The foll ately on the amena	lowing statement dment(s):
"The number of votes cast for the an	nendment(s) v	vas/were	sufficier	it for approval	
by					
()	oting group)				
	icorporator –	if in the h		ectors or officers h a receiver, trustee	
	(Typed or p	CN+ rinted nar	me of pe	OUISO rson signing)	
	(Title of per	son signi	- <u>(</u> ng)	<u> 20015</u>	O (NIMON)