## F21450

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

FILED

MAY 18 2012
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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: ALL AMERICAN TRAILER CONNECTION, INC. # F 21450 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: THERESA LAGO Name of Contact Person ALL AMERICAN TRAILER CONNECTION.INC. Firm/ Company 1102 S. DIXIE HWY Address LANTANA, FLORIDA 33462 City/ State and Zip Code TLAGO@AATC1.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: THERESA LAGO 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 & ■\$52.50 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ALL AMERICAN	TRAILER	CONNECTION.	INC.
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ALL AMERICAN	I TRAILER CO	NECTION	,INC.		
	orporation as currently	filed with the Flor	ida Dept. of State)		
# F21450					
	(Document Number o	f Corporation (if k	nown)		
Pursuant to the provisions of its Articles of Incorporation		la Statutes, this <i>Fle</i>	orida Profit Corporati	ion adopts the fo	llowing amendment(s) to
A. If amending name, ent	er the new name of the c	orporation:			
					The new
name must be distinguish "Corp.," "Inc.," or Co.," word "chartered," "profes.	or the designation "Cor,	p," "Inc," or "Co	o". A professional co	corporated" or orporation name	the abbreviation must contain the
B. Enter new principal of	ffice address, if applicab	l <u>e:</u>			
(Principal office address <u>M</u>	<u>IUST BE A STREET AD</u>	<u>DRESS</u> )			
C. Enter new mailing ad	dress, if applicable: BE A POST OFFICE B	() X)			
muning dam ess milit	DE 711 OOT OT TREE D	<u> </u>			<del></del>
				<u></u>	<del></del>
D. If amending the regist			s in Florida, enter th	e name of the	
new registered agent a	ind/or the new registered	<u>i office address:</u>			
Name of New Reg	istered Agent		<del></del>		
		(Florida street	address)		
New Registered O	ffice Address:		, Fl	orida	
		(City)		(Zip Co	ode)
New Registered Agent's S	Signature, if changing Re	gistered Agent:			
I hereby accept the appoint	tment as registered agent.	l am familiar wit	h and accept the oblig	zations of the po	sition.
					_
	Signature of l	New Registered Ag	ent, if changing	<del></del>	SE 20
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				SE	2 5

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 <math>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 Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	CEO	SHAWN MICHAEL LAGO	3206 CHAPEL HILL BLVD BOYNTON BCH, FL 33435
2)ChangeAddRemove	TCFO	CHRISTOPHER MICHAEL LAGO	5111 SABAL GARDENS LANE # 1 BOCA RATON, FL 33487
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	<del></del>		

ttach additional sheets, if necessary).	(Be specific)			
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an amendment provides for an exch	iange, reclassific	ation, or cancel	lation of issued	l shares,
rovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not co	ntained in the a	mendment itse	<u>elf:</u>
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				· <del></del>
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The date of each amendment(s) adoption: MAY 1, 2012
Effective date if applicable: MAY 1,2012
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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
by
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated MAY 1, 2012
Signature Thomas Loo La Co
(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)
THERESA LEE LAGO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)
Juda E Combast MY COMMISSION # EE 167554 EXPIRES: March 14, 2016 Borded Thru Budget Notary Services