H 55167

(Re	equestor's Name)	-
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	cument Number)	
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C. BRUMBLEY FEB 1 4 2022

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: PAW Tru	ickney, Inc.	RECEIVED
DOCUMENT NUMB	コニニル コ	0	2022 cm
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	2022 FEB 14 PM 12: 22
Please return all corresp	ondence concerning this ma	tter to the following:	SECRE LARY OF STATE TALLAHASSEE, FL
-	Autumn D	PERESDIN'S Name of Contact Person	1
_		Duprinjes, Ine Firm/Company	
-	6640	County Roc Address	rel 52
-	Hudso	Address N FL 3466 City/ State and Zip Code	<u></u>
-	,	S @ Dawdem ed for future annual report	
For further information	concerning this matter, pleas	se call:	
Autum D	Respiris Contact Person	at (<u>863</u> Area Co	
Enclosed is a check for	the following amount made		
S35 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)
Amer Divisi	ng Address Idment Section Idment Sec	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

PAW Trucking Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
H55167	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
PAW Emplayer leasing Corp	The new
PAW Employee Leusinet, Corp. name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	_Coco40 County Road 52
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	GC040 County Road 52 Hudson Fr 34667
C. Enter new mailing address, if applicable:	Calado County Royal 50
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	6640 County Road 52 Hudson, FL 34667
	HUUSON, M. 34667
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent NA	
· ·	#S ≥ III
(Florida stre	et address)
New Registered Office Address: NA	Florida 58
	Civ) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered 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 = 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.

X Change	<u>PT</u>	<u>John Do</u>	<u>oe</u>	
\underline{X} Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		···-		 ·
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				_
6) Change				
Add		-		
Remove				

Attach <i>addii</i>	or adding additional A tional sheets, if necessary)). (Be specific)	ge(s) nere:			
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C	lment provides for an ex	ahanna madassifin	ention on annuall	ation of icoused above		
provisions	for implementing the an	nendment if not co	ntained in the a	mendment itself:	<u>cs.</u>	
(if not a	applicable, indicate N/A)					
_ -						
		*				

	ach amendment(s) adoption: Jawary 1st 2022 ment was signed.	if other than the
Effective date	e <u>if applicable</u> :	
	(no more than 90 days after amendment file da	ate)
	date inserted in this block does not meet the applicable statutory filing requirem ffective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of A	Amendment(s) (CHECK ONE)	
	Iment(s) was/were adopted by the incorporators, or board of directors without shar not required.	reholder action and shareholder
	Iment(s) was/were adopted by the shareholders. The number of votes cast for the a reholders was/were sufficient for approval.	amendment(s)
	Iment(s) was/were approved by the shareholders through voting groups. The follow parately provided for each voting group entitled to vote separately on the amenda	
"The r	number of votes cast for the amendment(s) was/were sufficient for approval	
by .	(voting group)	
	Dated	
	Signature - Seat Stall	
	(By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or	
	appointed fiduciary by that fiduciary)	
	Robert Lyall	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	