# J67626

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2010 JAN -7 AHIH: 37
SECRETARY OF STATE

Amend + MC

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LAW OFFICES

#### NEILL, GRIFFIN, TIERNEY, NEILL & MARQUIS

CHARTERED

311 SOUTH SECOND STREET

SUITE 200

RICHARD V. NEILL+0 CHESTER B. GRIFFIN\*0 J. STEPHEN TIERNEY, III RICHARD V. NEILL, JR.+ RENÉE MARQUIS-ABRAMS\* FORT PIERCE, FLORIDA 34950

MAILING ADDRESS:

POST OFFICE BOX 1270

FORT PIERCE, FL 34954

TELEPHONE (772) 464-8200

FAX (772) 464-2566

January 5, 2009

\*BOARD CERTIFIED WILLS, TRUSTS & ESTATES LAWYER ♦BOARD CERTIFIED TAXATION LAWYER †BOARD CERTIFIED CIVIL TRIAL LAWYER DOF COUNSEL

> Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

> > Re: Amendments to Articles

Dear Sir:

Enclosed for filing with your department are the following:

- 1. Cover Letter and Articles of Amendment to Articles of Incorporation of American Rubber Manufacturing Corp.
- 2. Cover Letter and Articles of Amendment to Articles of Incorporation of American Machinery Corp.
- 3. Cover Letter and Articles of Amendment to Articles of Incorporation of Florida Tire Recycling, Inc.
- 4. Cover Letter and Articles of Amendment to Articles of Organization of Florida Tire Transport, LLC.

Also enclosed is our firm's check in the amount of \$130.00 to cover your filing fee, together with an extra copy of the documents which we request you indicate receipt and filing and return to us in the enclosed self-addressed, stamped envelope.

Your usual courtesy and cooperation is appreciated.

Yours very truly,

Richard V. Neil

Richard I have

/hmb Encs.

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FLORIDA T	IRE RECYCLING, INC.	
DOCUMENT NUMB	J67626 ER:		
The enclosed Articles	of Amendment and fee are	e submitted for filing.	
Please return all corres	pondence concerning this	matter to the following:	
	RICHARD V. NEILL		
<del></del>	Na	me of Contact Person	
	Neill Griffin Tierne	y Neill & Marquis	
		Firm/ Company	
	P. O. Box 1270		
		Address	
	Ft. Pierce, FL 34954		
	Cit	y/ State and Zip Code	
<del></del> _	dickneill@neillgriff E-mail address: (to be used	in.com for future annual report notification)	
For further information	n concerning this matter, p	olease call:	
RICHARD V. NEIL	L Contact Person	at ( 772 ) 464-8200  Area Code & Daytime Tele	ephone Number
		ade payable to the Florida Depart	
□ \$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 Addre Amendment Se Division of Co P.O. Box 6327 Tallahassee, FL	ection rporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	e

Tallahassee, FL 32301

### **Articles of Amendment** to Articles of Incorporation of

FLORIDA TIRE RECYCLING, INC.	h the Florida Dept. of State)  All And SEE STATE  ration (if known)
(Name of Corporation as currently filed with	h the Florida Dept. of State
J67 <b>6</b> 26	ALLAHARY MILL
(Document Number of Corpor	ration (if known)
ursuant to the provisions of section 607.1006, Florida Stat	tutes, this <i>Florida Profit Corporation</i> adopts the follow
nendment(s) to its Articles of Incorporation:	
If amending name, enter the new name of the corporat	ion:
TRINITY CAPITOL CORP.	The new
me must be distinguishable and contain the word "conbreviation "Corp.," "Inc.," or Co.," or the designation " me must contain the word "chartered," "professional associated"	"Corp," "Inc," or "Co". A professional corporation
Enter new principal office address, if applicable:	19050 Glades Cut Off Road
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	Port St. Lucie, FL 34987
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	19050 Glades Cut Off Road
	Port St. Lucie, FL 34987
. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	
Name of New Registered Agent:	
New Registered Office Address: (Flo	orida street address)
	, Florida
(City	y) (Zip Code)
ew Registered Agent's Signature, if changing Registered	Agent:
nereby accept the appointment as registered agent. I am fai	
Signature of Ne	w 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)

<u>Titl</u>	<u>e</u>	Name	Address	<u>Ty</u>	oe of Action
Sec	cy_ Jo	h <u>n J. Wilson</u>	19050 Glades Cut Off Rd Port St. LUcie, FL 34987		Add Remove
	<del></del>				Add Remove
					Add Remove
		g or adding additional Articles, enter chional sheets, if necessary). (Be specific)			
		dment provides for an exchange, reclas			
j	(if not a	for implementing the amendment if not pplicable, indicate N/A)	contained in the amendment is	<u>:e:1:</u>	•
	<del></del>		71	<del></del>	
	·				

The date of each amendment(s) adoption: December 31, 2009
(date of adoption is required)
Effective date if applicable: December 31, 2009
Effective date if applicable:  December 31, 2009  (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"
(voting group)
<ul> <li>The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.</li> <li>The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.</li> </ul>
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)
SUSAN K. WILSON, President
(Typed or printed name of person signing)
President
(Title of person signing)