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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Retranca Equipme	nt and Trucking Corp.			
DOCUMENT NUMB					
	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	itter to the following:			
		David S. Tupler, Esq.			
_	Name of Contact Person				
	David S. Tupler, P.A.				
-	<u></u>	Firm/ Company			
	9900 Stirling Road, Suite 243				
-	Address				
	Cooper City, FL 33024				
~		City/ State and Zip Cod	e		
		DavidSTupler@aol.com	l		
-	E-mail address: (to be us	sed for future annual report	notification)		
	concerning this matter, pleases. S. Tupler, Esq.	se call: at (364-6263		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C 2415 î	Address Innent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

FILED

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Retranca Equipment & Trucking Corp

(Name of Corporation as curre	ntly filed with the Florida I	Dept. of State) I Ur STATE
L181	05	Dept. OF STATE TALL ALTASSEE, FL
(Document Number	r of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporatio	n adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.:	A professional corporatio	ed" or the abbreviation "Corp.," n name must contain the word
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
		AT -
C. Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)	18/37	
		
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office address.	ldress in Florida, enter the	name of the
N/A		
Name of New Registered Agent		
(Fiorida	street address)	SI/A
New Registered Office Address:	(City)	, Florida N/A (Ziv Code)
	(Cuỳ)	(Lip Code)
New Registered Agent's Signature, if changing Registered Age	nt:	
I hereby accept the appointment as registered agent. I am familia	r with and accept the obliga	tions of the position.
Signature of New	Registered Agent, if changing	771

Check if applicable

 \square 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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Gloria Trujillo	1280 SW 26 Ave
X Add			Suite 4
Remove			Fort Lauderdale, FL 33312
2) Change	 _		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
-	
	
	
	
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<u>f an amendment provides for an exch</u>	range, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

•

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	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sl	hareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the flicient for approval.	ne amendment(s)
	roved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amer	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected	rector, president or other officer – if directors or officers, by an incorporator – if in the hands of a receiver, trustee	
appoint	ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	