

PD2000062827

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 JUL -5 AM 8:22

JUL 11 2016

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TRUCK AND EQUIPMENT SOLUTION CORP

DOCUMENT NUMBER: P02000062827

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROLINA PACHECO

Name of Contact Person

SIS ACCOUNTING SERVICE INC

Firm/ Company

5979 NW 151 STREET STE 224

Address

MIAMI LAKES FL 33014

City/ State and Zip Code

SISACCOUNTINGSERVICE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROLINA PACHECO

Name of Contact Person

at (305)

828-0600

Area Code & Daytime Telephone Number

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

TRUCK AND EQUIPMENT SOLUTION CORP

2016 JUL -5 AM 8: 22

(Name of Corporation as currently filed with the Florida Dept. of State)

P02000062827

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

*(Principal office address **MUST BE A STREET ADDRESS**)*

3106 WEST 74 STREET

HIALEAH FL 33018

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

3106 WEST 74 STREET

HIALEAH FL 33018

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

3106 WEST 74 STREET

(Florida street address)

New Registered Office Address: HIALEAH

(City)

, Florida 33018

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary). (Be specific)

[illegible]

(if not applicable, indicate N/A)

[illegible]

06-28-2016

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 06-28-2016

(no more than 90 days after amendment file date)

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DIVISION OF CORPORATIONS

2016 JUL -5 AM 8: 22

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

☐ 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.

06-28-2016
Dated _____

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)

ABELARDO MARTINEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)