## POED0111259

Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: VMG TRU	CK & TRAILER LEASING CORP
DOCUMENT NUMBER: P03000111259	
The enclosed Articles of Amendment and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
MARIEL PARRA	
	Name of Contact Person
M&M ASSOCIATES	S GROUP CORP
	Firm/ Company
2350 WEST 84 STR	EET SUITE 7
	Address
HIALEAH, FL 33016	
	City/ State and Zip Code
MM.ASSOCIATESG@GN	IAIL.COM
É-mail address: (	to be used for future annual report notification)
For further information concerning this matter.	er, please call:
MARIEL PARRA	at ( 305 ) 698-8171
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	t made payable to the Florida Department of State:
\$35 Filing Fee	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



VMG TRUCK & TRAILER LEASING CORP			16 APP -5 PH 1: 13
(Name of Corporation	on as currently fi	led with the Florida De	
P03000111259			SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Docume	ent Number of Co	orporation (if known)	- M. C. Million C. C. C. C.
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Flo	rida Profit Corporation	adopts the following amendment(s
A. If amending name, enter the new name of the cor	rporation:		
VMG TRUCK & TRAILER CORP			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	" "Inc," or "Co"	". A professional corpo	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u> )			<u> </u>
	-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>x</u> ) .		
	-		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		in Florida, enter the n	ame of the
Name of New Registered Agent			· · · · · · ·
•	(Florida street	address)	
New Registered Office Address:			, Florida
	(Ci	ty)	(Zip Code)
New Registered Agent's Signature, if changing Regil hereby accept the appointment as registered agent.		n and accept the obligation	ons of the position.
Signo	ature of New Regi	istered Agent, if changing	<u> </u>

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 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	$\underline{\mathbf{v}}$	Mike Jones				
<u>X</u> Add	<u>sv</u>	Sally Smi	<u>th</u>			
Type of Action (Check One)	<u>Title</u>	<u>]</u>	<u>Name</u>	Address		
1) Change						
Add						
Remove						
2) Change	<del></del>		·			
Add						
Remove						
3) Change		<del>_</del>				
Add						
Remove						
4) Change		_				
Add			<del></del>			
Remove						
5) Change						
Add						
Remove						
6) Change		<del></del> -				
Add						
Remove						

Attach additional sheets, if necessary).	). (Be specific)	
· · · · · · · · · · · · · · · · · · ·		
		<del> </del>
<del> </del>	<del></del>	
f an amendment provides for an expressions for implementing the an (if not applicable, indicate N/A)	schange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:	
•		

The date of each amendment(s) acd ate this document was signed.	doption:, if oth	er than the
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 requirements, this date will not be li partment of State's records.	sted as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.  03/29/2016  Dated  Signature A	opted by the incorporators without shareholder action and shareholder	
(By a d selecte	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	VICTOR CARRASCAL	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	_