

P04000098327

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*Dominic Fiore*  
AUTHORIZATION BY PHONE TO  
CORRECT *Date of adoption*  
DATE \_\_\_\_\_  
DOC. EXAM \_\_\_\_\_



500041635445

10/25/04--01040--009 \*\*35.00

FILED  
04 OCT 25 AM 10:45  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

*Ps 11/2/04*  
*Adoption*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** SPECIALTY LOGISTICS, INC

**DOCUMENT NUMBER:** PO4000098327

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

Please return all correspondence concerning this matter to the following:

Dominic Fiorella  
(Name of Contact Person)

TROPICAL ICE TRUCK SERVICE, INC  
(Firm/ Company)

1259 W. ATLANTIC BLVD SUITE 125  
(Address)

POMPANO BEACH, FL 33069  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Dominic Fiorella at (954) 782-4242  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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 Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

04 OCT 25 AM 10:45

Specialty Logistics, Inc.

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

DEPT. OF STATE  
TALLAHASSEE, FLORIDA

PO4000098327

(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:

**NEW CORPORATE NAME (if changing):**

Tropical Isle Truck Service, Inc

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Article VI- Business Address

1259 W. ATLANTIC BLVD SUITE 125

Pompano Beach, FL 33069

Article VIII- Board of Directors

Dominic Fiorella - President

Kristy Innocenzi - CEO

Michael A Inverso - Vice President

Article IV- Capital Stock

Kristy Innocenzi - 100 shares x 1<sup>st</sup>

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 10/15/04

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

**(CHECK ONE)**

- ☐ The amendment(s) was/were approved 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):*

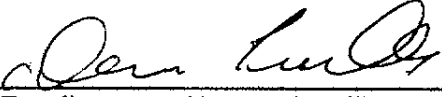
"The number of votes cast for the amendment(s) was/were sufficient for approval by

\_\_\_\_\_"  
(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.

Signed this 15<sup>TH</sup> day of October, 2004

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)

Dominic Fiorella

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**FILING FEE: \$35**