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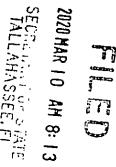
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C KILLPSEN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	T & L SER	VICE REPAIR INC				
DOCUMENT NUMBE	CR: P04000160740					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspond	ondence concerning this ma	tter to the following:				
		Jacqueline Horta				
		Name of Contact Persor	1			
	J Horta Accounting & Taxes Inc					
		Firm/ Company				
		12905 SW 42 Street	Suite 217			
_	Address					
	Miami, Florida, 33175					
_		City/ State and Zip Code	e			
jhortafl	@bellsouth.net					
-	E-mail address: (to be us	sed for future annual report	notification)			
	concerning this matter, pleaseline Horta	se call: at (_305	387-2906			
Name of Contact Person		at (Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:			
■ \$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		Amend Divisio Clifton 2661 E	Address diment Section on of Corporations Building Executive Center Circle assec, FL 32301			

Articles of Amendment

to

Articles of Incorporation

οf

T & L SERVICES REPAIR INC

(Name of Corporation as currently f	iled with the Florida Dept. of State)
P04000160740	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatticles</i> of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
REYES TRUCKING INC	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2020 HAR 10 AM 8
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	t address)
No. Projected Office (ddeser	. Florida
New Registered Office Address: (C	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	
Signature of New Reg	istered 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)

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.

Example: 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>	Name	<u>Addres</u> s	
1) Change	Sec	Romney Reyes	708 FAZZINI DR	
x Add			114	
Remove			BABSON PARK, FL 33827	
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change			-	
Add				
Remove				
5) Change				
Add				
Remove				
6) Channa				
6) Change			· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	
<u>-</u>	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption: _	03/06/2020	, if other than the
date this document was signed. 03/06/2020		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	s not meet the applicable statutory filing requirements, this do of State's records.	ate will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo	he shareholders. The number of votes cast for the amendment(or approval.	(s)
	the shareholders through voting groups. The following stateming group entitled to vote separately on the amendment(s):	ient
	nendment(s) was/were sufficient for approval	
hy	woting group)	
(1	voting group)	
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were adopted by the action was not required.	he incorporators without shareholder action and shareholder	
03/06/2020		
Signature (), / ii	Pens	
(By a director, pr	resident of other officer - if directors or officers have not been	<u> </u>
	ncorporator – if in the hands of a receiver, trustee, or other cou ary by that fiduciary)	ırt
	TITO L REYES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	