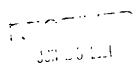
## P05000005990

| (Re                     | equestor's Name)   |             |
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| (Cit                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nar  | ne)         |
| (Do                     | ocument Number)    | . <u> </u>  |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
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## <u>COVER LETTER</u>

TO: Amendment Section Division of Corporations

| NAME OF CORPO           | PRATION: A & M TRUCKIN                      | G INC                                                              |                                                                                        |  |
|-------------------------|---------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------|--|
| DOCUMENT NUM            | P05000008000                                |                                                                    |                                                                                        |  |
| The enclosed Article    | s of Amendment and fee are st               | bmitted for filing.                                                |                                                                                        |  |
| Please return all corr  | espondence concerning this ma               | atter to the following:                                            |                                                                                        |  |
|                         | EMEREGILDO FREGOSO                          |                                                                    |                                                                                        |  |
|                         |                                             | Name of Contact Perso                                              | n                                                                                      |  |
|                         | A & M TRUCKING INC                          |                                                                    |                                                                                        |  |
|                         |                                             | Firm/ Company                                                      |                                                                                        |  |
|                         | 8815 OLD LAKELAND HV                        | VΥ                                                                 |                                                                                        |  |
|                         |                                             | Address                                                            |                                                                                        |  |
|                         | DADE CITY, FL 33525-140                     | 14                                                                 |                                                                                        |  |
|                         |                                             | City/ State and Zip Cod                                            | e                                                                                      |  |
|                         | MEREFREGOSO@GMAIL.COM                       |                                                                    |                                                                                        |  |
|                         | _                                           | sed for future annual report                                       | notification)                                                                          |  |
| For further information | on concerning this matter, plea             |                                                                    | 714-1443                                                                               |  |
| Name of Contact Person  |                                             | at (<br>Area Co                                                    | de & Daytime Telephone Number                                                          |  |
| Enclosed is a check f   | or the following amount made                | payable to the Florida Depa                                        | artment 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) |  |
|                         | iling Address                               |                                                                    | Address                                                                                |  |
|                         | endment Section<br>vision of Corporations   | Amendment Section                                                  |                                                                                        |  |
|                         | nsion of Corporations<br>). Box 6327        | Division of Corporations The Centre of Tallahassee                 |                                                                                        |  |
|                         | lahassee, FL 32314                          |                                                                    | N. Monroe Street, Suite 810                                                            |  |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the Florida Dept. of State)  (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:  The new name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "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)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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  SRI5 OLD LAKELAND HWY  (Florida street address)  DADE CITY. FL 33525  DADE CITY. Florida  Florida  SRI5 OLD LAKELAND HWY  (Florida street address)  DADE CITY. Florida  Florida  SRI5 OLD LAKELAND HWY  (Florida street address)  DADE CITY. Florida  SRI5 OLD LAKELAND HWY  (Florida street address)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | A & M TRUCKING INC                           |                                                                 |                                             |                                         |                      |    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------|---------------------------------------------|-----------------------------------------|----------------------|----|
| 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:  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 To". 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)  DADE CITY, FL 33525  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  S815 OLD LAKELAND HWY  Florida street address:  DADE CITY  Florida Street address:  DADE CITY  Florida FL 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ( <u>Name</u>                                | of Corporation as current                                       | ly filed with the Florida Dept              | t. of State)                            |                      |    |
| 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:  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.," or the designation "Corp., "Inc.," or "Co.," at 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)  DADE CITY, FL 33525  DADE CITY Selected Agent and/or the new registered office address:  New Registered Agent  DADE CITY  Florida Street address:  DADE CITY  Florida                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | P05000008990                                 |                                                                 |                                             |                                         |                      |    |
| its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  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)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  DADE CITY, FL 33525  DADE CITY, FL 33525  DADE CITY, FL 33525  DADE CITY, FL 33525  S815 OLD LAKELAND HWY  DADE CITY, FL 33525  DADE CITY, FL 33525  S815 OLD LAKELAND HWY  (Florida street address)  Name of New Registered Agent  8815 OLD LAKELAND HWY  (Florida street address)  DADE CITY  FL 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                              | (Document Number of                                             | of Corporation (if known)                   |                                         |                      |    |
| 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)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  DADE CITY, FL 33525  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  S815 OLD LAKELAND HWY  (Florida street address)  DADE CITY  Florida FL 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                              | .1006, Florida Statutes, this                                   | Florida Profit Corporation ac               | dopts the following a                   | amendment(s)         | to |
| 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)  C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)  DADE CITY, FL 33525  DADE CITY  Florida street address:  DADE CITY  Florida Street address:  DADE CITY  Florida  FL 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | A. If amending name, enter the new n         | ame of the corporation:                                         |                                             |                                         |                      |    |
| "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)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  DADE CITY, FL 33525  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  S815 OLD LAKELAND HWY  (Florida street address)  DADE CITY  Florida FL 33525  DADE CITY  Florida FL 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                              |                                                                 |                                             |                                         | The new              |    |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  DADE CITY, FL 33525  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  DADE CITY, FL 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | "Inc.," or Co.," or the designation "C       | "orp," "Inc," or "Co"                                           | A professional corporation n                | or the abbreviation<br>ame_must_contain | "Corp.,"<br>the word |    |
| C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)  DADE CITY, FL 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | D. Enter new principal office address        | if applicable                                                   | 8815 OLD LAKELAND I                         | IWY                                     |                      |    |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  DADE CITY, FL 33525  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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                              |                                                                 | DADE CITY, FL 33525                         |                                         | 107/                 | 1  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  DADE CITY, FL 33525  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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                              |                                                                 |                                             |                                         |                      |    |
| DADE CITY, FL 33525  DADE CITY  DATE |                                              |                                                                 | 8815 OLD LAKELAND I                         | HWY :                                   | 28 P                 |    |
| Name of New Registered Agent  8815 OLD LAKELAND HWY  (Florida street address)  New Registered Office Address:  DADE CITY  Florida  Fl. 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | [Maning marcas [MAT DE AT OUT OF THE DISCH.] |                                                                 | DADE CITY, FL 33525                         | ; .                                     | i,                   |    |
| Name of New Registered Agent  8815 OLD LAKELAND HWY  (Florida street address)  New Registered Office Address:  DADE CITY  Florida  Fl. 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                              |                                                                 |                                             | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | . 3                  |    |
| 8815 OLD LAKELAND HWY  (Florida street address)  New Registered Office Address:  DADE CITY  Florida  Fl. 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                              |                                                                 |                                             | ne of the                               |                      |    |
| (Florida street address)  New Registered Office Address:  DADE CTTY  Florida FL 33525  Florida                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Name of New Registered Agent                 |                                                                 |                                             |                                         |                      |    |
| New Registered Office Address: DADE CITY FL 33525                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                              | 8815 OLD LAKELAND                                               | HWY                                         |                                         |                      |    |
| New Registered Office Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                              | (Florida st                                                     | reet addressi                               |                                         |                      |    |
| 19 to 19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | New Registered Office Address:               | DADE CITY                                                       | ·                                           | , Florida                               |                      |    |
| $(City)$ $(Zip\ Code)$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                              |                                                                 | (City)                                      | (Zip Co                                 | de)                  |    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Thereby accept the appointment as regist     | nanging Registered Agent<br>tered agent. I am fam <u>ili</u> ar | <u>c:</u><br>with and accept the obligation | s of the position.                      |                      |    |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Sma                                          | 0=: 1 to 100                                                    | as                                          |                                         |                      |    |
| Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | THIM                                         | Signature of New 1                                              | Registered Agent, if changing               |                                         |                      |    |

Check if applicable

☐ The amendment(s) is/are being tiled 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)

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>L.L.</u>  | <u>John Doe</u> |                       |
|-------------------------------|--------------|-----------------|-----------------------|
| X Remove                      | <u>V</u>     | Mike Jones      |                       |
| X Add                         | <u>sv</u>    | Sally Smith     |                       |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>     | <u>Addres</u> s       |
| 1) Change                     | VP           | ANA FREGOSO     | 7821 FORBES RD        |
| Add                           |              |                 | ZEPHYRHILLS, FL 33540 |
| X Remove                      |              |                 |                       |
| 2) Change                     |              |                 |                       |
| Add                           |              |                 |                       |
| Remove<br>3 ) Change          |              |                 |                       |
| Add                           |              |                 |                       |
| Remove                        |              |                 |                       |
| 4) Change                     |              |                 |                       |
| Add                           |              |                 |                       |
| Remove                        |              |                 |                       |
| 5) Change                     |              |                 | -                     |
| Add                           |              |                 |                       |
| Remove                        |              |                 |                       |
| 5) Change                     |              |                 |                       |
| Add                           |              |                 |                       |
| Remove                        |              |                 |                       |

| Attach additional sl    | ling additional Arti<br>leets, if necessary). | (Be specific)       |                     |                                       |             |
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| <u>f an amendment p</u> | <u>rovides for an excl</u>                    | nange, reclassifica | ation, or cancellat | ion of issued shares                  | <u>5,</u>   |
| provisions for imp      | olementing the ame                            | endment if not cor  | ntained in the am   | endment <u>itself:</u>                |             |
| (if not applicat        | ble, indicate N/A)                            |                     |                     |                                       |             |
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|                                                                                 | 06/21/2021                                                                                                                                                                      | if other than the                            |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| The date of each amendment(s) ac date this document was signed.                 | option:                                                                                                                                                                         | , if other than the                          |
| Effective date <u>if applicable</u> :                                           |                                                                                                                                                                                 |                                              |
|                                                                                 | (no more than 90 days after amendment file date)                                                                                                                                |                                              |
| <b>Note:</b> If the date inserted in this b document's effective date on the De | ock does not meet the applicable statutory filing requirements, this partment of State's records.                                                                               | s 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 shareholder                                                                                                            | action and shareholder                       |
| ☐ The amendment(s) was/were ado<br>by the shareholders was/were su              | pted by the shareholders. The number of votes cast for the amendment of the sproval.                                                                                            | ient(s)                                      |
| ☐ The amendment(s) was/were app<br>must be separately provided for              | roved by the shareholders through voting groups. The following started voting group entitled to vote separately on the amendment(s):                                            | element                                      |
| "The number of votes cast                                                       | or the amendment(s) was/were sufficient for approval                                                                                                                            |                                              |
| by                                                                              | "                                                                                                                                                                               |                                              |
|                                                                                 | (voting group)                                                                                                                                                                  |                                              |
| 06/21/2021<br>Dated                                                             | ellailde Topaso                                                                                                                                                                 |                                              |
| (By a di<br>selecteo                                                            | rector, president or other officer – if directors or officers have not b, by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary) |                                              |
|                                                                                 | EMEREGILDO FREGOSO                                                                                                                                                              |                                              |
|                                                                                 | (Typed or printed name of person signing)                                                                                                                                       |                                              |
|                                                                                 | PRESIDENT                                                                                                                                                                       |                                              |
|                                                                                 | (Title of person signing)                                                                                                                                                       | <u>.                                    </u> |

. . . . .