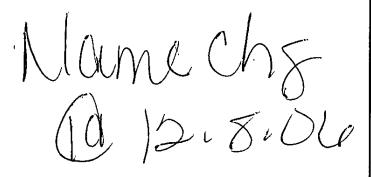
## P05000029533

(Re	equestor's Name)	
(Ac	ldress)	,
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	<del>e #)</del>
PICK-UP	MAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	







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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Intercoastal Truch & Auto Inc PO 50000 29533 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person)

Inter coastal Truck & Auto, Inc

(Firm/Company) Merboune Fl 32904
(City/ State and Zip Code) For further information concerning this matter, please call: (Name of Contact Person) at (321) 953 3007 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ☐\$52.50 Filing Fee □\$43.75 Filing Fee & \$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Street Address** Mailing Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation

οf

Intercoastal Truck & Auto, Inc. , Of
(Name of corporation as currently filed with the Florida Dept. of State)
Po5000 29533 (Document number of corporation (if known)
(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):
Harbor city Truck & Auto 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)
O N.S.
OE TO
2 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
(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)

EFFECTIVE DATE

t(s) adoption: 12-5.06
(no more than 90 days after amendment file date)
(CHECK ONE)
was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.
was/were approved by the shareholders through voting groups. The at must be separately provided for each voting group entitled to vote imendment(s):
f votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
was/were adopted by the board of directors without shareholder action was not required.
was/were adopted by the incorporators without shareholder action and was not required.
director, president or other officer - if directors or officers have not been ted, by an incorporator - it in the hands or a receiver, trustee, or other court inted fiduciary by that fiduciary)  Kanen Lynn Foster  (Typed or printed name of person signing)  President  (Title of person signing)

FILING FEE: \$35