2024-12-09 18:54:56 GMT 18132001059 From, Trucking Permits And More LLC Electronic Filing Cover Sheet

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To:			
	Division of Cor	•	
	Fax Number	: (850)617-6380	IALLAHÄ
From:			75 C
	Account Name	: TRUCKING PERMITS AND MORE LLC	AĤÁ
	Account Number	: 120140000047	S.
	Phone	: (813)774-4726	(Δ). · · · · · · · · · · · · · · · · · · ·
	Fax Number	: (813)877-2186	
		s for this business entity to be used for	Eture :
anr	nual report maili	ngs. Enter only one email address please.	.* **

COR AMND/RESTATE/CORRECT OR O/D RESIGN AVILA'S TRUCKING INC.

Certificate of Status	0
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Page Count	04
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From: Trucking Permits And More LLC

COVERLETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: AVILA'S TRUCK	GING INC				
DOCUMENT NU	MBER: P05000091245					
The enclosed Articl	es of Amendment and fee are s	ubmitted for filing.				
Please return ail cor	respondence concerning this m	atter to the following:				
	AVILA, PEDRO					
	Name of Contact Person					
	AVILA'S TRUCKING INC.					
	Firm: Company					
	4513 W BURKE ST					
	Address					
	TAMPA, FL 33614					
	City/ State and Zip Code					
	pavila911@yahoo.com					
	E-mail address: (to be u	sed for future annual repor	i notification)			
For further informati	on concerning this matter, plea					
	of Contact Person	at (2702307 de & Daytime Telephone Number			
(Same	or Contact Person	Area Co	de & Dayrime Telephone Number			
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:			
XI \$35 Filing Fee	ClS43 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 Talinhassee, FL 32314		Amend Divisio The Co 2415 ?	Address Iment Section on of Corporations entre of Tallahassec N. Monroe Street, Suite 810 issee, FL 32303			

Articles of Amendment to Articles of Incorporation of

AVILA'S TRUCKING INC.					
P05000091245	of Corporation as currently f	led with the Florida Dept. of State	<u>=</u>)		
	(Document Number of C	orporation (if known)			·-
Pursuant to the provisions of section 60° its Articles of Incorporation:	7.1006, Florida Statutes, this Flo	rida Profit Corporation adopts the	followin	g amend	lment(s) to
A. If amending name, enter the new r	name of the corporation:				
nome must be distinguishable and contai "inc.," or Co.," or the designation " "chartered," "professional association,		pany," or "incorporated" or the abl rofessional corporation name must	breviatio contair	_The n on "Corp or the wo	ew ord
B. Enter new principal office address	if applicable:				
(Principal office address MUST BE A.S.	STREET ADDRESS)		<u> </u>	202	-
			<u> </u>	_ _	
C. Enter new mailing address, if appl	icable:		AHAS	_ ``	
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)		93S	ف	[
	_		FLORID	PH 12: -	. 🖰
D. It amending the registered agent ar new registered agent and/or the ne	nd/or registered office address	in Florida, enter the name of the	>	0	_
Name of New Registered Agent	AVILA, PEDRO				
	4513 W BURKE ST				
	(Florida street a	ddress)			
New Registered Office Address:	ТАМРА	Florida ^{3.}	3614		
	(City)	(Zip C	ode)	•
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered a'geht. I am tämiltar with s	mel accept the obligations of the pos ered Agent, if changing	sition.		
Check it applicable The amendment(s) is/are being filed to	(07.0130.01)	-			
☐ The amendment(s) is/are being filed pu	irsuant to s. 607.0120 (11) (c), F	.S.			

From: Trucking Permits And More LLC

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 - ChiefExecutive 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 Doc 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	
\underline{X} Add	<u>\$</u> V	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Enciso, Mercedes	4513 W BURKE ST
Add			TAMPA, FL 33614
X Remove			
2)Change			
Add			
Remove 3) Change			
Add			
Remove			
1) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

2024-12-09 18:54:56 GMT

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From: Trucking Permits And More LLC

To:

Page: 7 of 8

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	The date of each amendment(s) date this document was signed	adoption:		if other than the			
	Effective date if applicable:						
		(no more than 90 days	s after amendment file date)				
	Note: If the date inserted in this document's effective date on the E	block does not meet the applicable of		his date will not be listed as the			
	Adoption of Amendment(s)	(<u>CHECK ONE</u>)					
	The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of	of directors without shareholde	r action and shareholder			
	The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The numb ufficient for approval.	per of votes east for the amend	ment(s)			
	☐ The amendment(s) was/were ap must be separately provided for	proved by the shatcholders through vecach voting group entitled to vote se	oting groups. The following st	atement			
	"The number of votes cast for the amendment(s) was/were sufficient for appropria						
	, 	(voting group)	."				
	Dated	irector, president or other officer—if all, by an heorporator—if in the hands ed fiduciary by that fiduciary)	dinorar ne 65	ASSEE FLOR			
		PEDRO AVILA					
		(Typed or printed name or	f person signing)				
		PRESIDENT					
		(Title of person signing)					