

P06000031182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

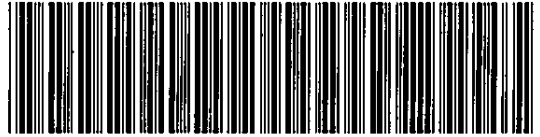
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*Att: Karen***COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GP & SONS TRUCKIG, INC.

DOCUMENT NUMBER: P06000031182

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

Please return all correspondence concerning this matter to the following:

Giraldo Pino

Name of Contact Person

GP & SONS TRUCKING, INC.

Firm/ Company

944 SW Butterfly Terrace

Address

Port Saint Lucie F.L 34953

City/ State and Zip Code

girap6@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Giraldo Pino

Name of Contact Person

at (772)

240-3810

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 1, 2009

GIRALDO PINO
GP & SONS TRUCKING, INC.
944 SW BUTTERFLY TERRACE
PORT SAINT LUCIE, FL 34953

SUBJECT: GP & SONS TRUCKING, INC.
Ref. Number: P06000031182

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2009 annual report. The entity must be reinstated before this document can be filed.

The total amount due to reinstate is \$750.00.

The fees to reinstate the corporation are as follows: \$600 reinstatement fee, \$150.00 filing fee per year for the years 2009 through the current year.

Therefore, the total fee to file the reinstatement is \$750.00. Add an additional \$8.75 for each certificate of status requested.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 909A00031840

Att: Karen

Articles of Amendment
to
Articles of Incorporation
of

GP & SONS TRUCKING, INC.

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

P06000031182

(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:

GR TOWING, INC.

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**)

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:

New Registered Office Address:

(Florida street address)

Florida

(City)

(Zip Code)

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.

Signature of New Registered Agent, if changing

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Att: Karen

Title	Name	Address	Type of Action
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

			<input type="checkbox"/> Add <input type="checkbox"/> Remove

			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an 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)

The date of each amendment(s) adoption: 9/24/09

(date of adoption is required)

Att: Karen

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted 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.

Dated 09-24-2009

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)

Giraldo Pino

(Typed or printed name of person signing)

President

(Title of person signing)