P06000078876

(R€	equestor's Name)	
(Ad	ldress)	·
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(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

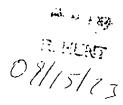
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COVER LETTER

TO: Amendment Section

Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations	
NAME OF CORPORATION: DED JETTRUCK MC. DOCUMENT NUMBER: PO600078876	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
City/ State and Zip Code	2023 Sept 17 - DR 15: 10
For further information concerning this matter, please call:	- - -
Chery Creason at 813 645-4006 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee \$\ \text{Certificate of Status} \ \text{Certified Copy} \ (Additional copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment Section	

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment

to

Articles	of	Incorp	oration
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of				

DED LIFT TRUCK MC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P06000078876	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amits Articles of Incorporation:	iendment(s) t
A. If amending name, enter the new name of the corporation:	
The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A."	Corp.," e word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Safetythachoe, FL 3469	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Sofety Harbol, FL 31	st. 1695
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 1080 With a Coochee St. (Florida street address) New Registered Office Address: Safety Harbol , Florida 346 (City) (City)	95
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.	2023 SHP 15 PH PS
Signature of New Registered Agent, if changing	5
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	PH 19:

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	PT John Doc	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	PD Donald A.B	artram 702 6 AVE SE
Add Remove		Kuskin FL 33570
2) Change	VBTD DomaJP	Sartram 702 Lo AVE SE.
Add		Kuskin, 1-L 33570
Remove 3) Change	PD Jason A.Ba.	Safety Harbon, FL 34695
Add Add		Satety Harbon, PL 37013
Remove 4) Change	VPSID Margaret.	J. Bartram
<u></u> ✓ Add	J	1080 With la coocchee St Safety Harbor FL 34695
Remove		Solety Harry Fl 3901
5) Change		
Add		
Remove		
6) Change		20 20 20
Add		2023 S
Remove		77
		15 PH 2:
		2 - 2

The date of each amendment(s) adoption: (1) (+1, 2023)	_, if other	than the
date this document was signed. Effective date if applicable:		
(no more than 90 days after amendment file date)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	поt be liste	d as the
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	hareholder	
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''	202	<u> </u>
(voting group)	دن این این	<u>(</u> ,,,
Dated Sept 12, 2023	5	
Signature Sandal A Bartin	PH I2: 40	1.C.
(By a director, president or other officer – if directors or officers have not been	- 2:	•
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	Ö	<u>.</u> -
Donald A. Bartran		
(Typed or printed name of person signing)		
P.D.		
(Title of person signing)		