PO600118249

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Spivey 9 Son's Trucking Inc. DOCUMENT NUMBER: POLOCO 118249				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Spivey & Sons Trucking Tro- Firm/ Company U148 Sack Drive Sach Address Tacksonville, F1 32216 City/ State and Zip Code Gayspivey 1 @ (mail com E-mail address) (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Michelle Spence. at (904) 885-8480 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$\sum{35.52.50}{\sum{552.50}}\$ Filing Fee Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallabrages El. 333142661 Executive Center Circle				

Taliahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Name of Corporation as curren	TUCKING	Dept. of State)	
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporati	ion adopts the folio	wing amendment(s) to
A. If amending name, enter the new name of the corporation:	ı		
1	nla		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional co	corporated" or the reporation name m	e abbreviation ust contain the
B. Enter new principal office address, if applicable:	na		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
			<u> </u>
C. Enter new mailing address, if applicable:	$O(C_{\lambda})$		ုံ ပဲ
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
			- 1 15
	<u> </u>		<u> </u>
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre		e name of the	ا
Name of New Registered Agent			
Name of New Registered Agent			
tFlorida s	treet address)		
	<u> </u>	*** * 1	
New Registered Office Address:	(Citv)	, Florida 	Zip Code)
	•		
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian		ations of the positi	on
i nevery weeeps me appointment as registered agent, I am jumilia	min and accept one omig		
	10		
	Registered Agent, if chang		·····

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.

X Change	PT Jol	hn Doc	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	$\overline{\mathcal{D}}$	Kyle Spivey	6/18 Sa 675 Dec
Add		•	Jax fr 32216
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
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5) Change			
Add			
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			- Hatian of iceu	ad chares	
an amendment provides for an	exchange, reclass	ification, or car t contained in th	cellation of issu e amendment it	ed shares, self:	
an amendment provides for an provisions for implementing the (if not applicable, indicate N/.	amendment if no	ification, or car t contained in th	cellation of issu e amendment it	ed shares, self:	
provisions for implementing the	amendment if no	ification, or car t contained in th	cellation of issu e amendment if	ed shares, self:	
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provisions for implementing the	amendment if no	ification, or car	cellation of issu	ed shares, self:	
an amendment provides for an provisions for implementing the (if not applicable, indicate N/.	amendment if no	ification, or can	cellation of issue	ed shares, self:	

The date of each amendment(s) adoption:	6-28-17	, if other than the
late this document was signed.		
Effective date if applicable:	6-28-17	
(no more than 90 days after amendment file da	te)
Note: If the date inserted in this block does not locument's effective date on the Department of Sta		ents, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app		mendment(s)
☐ The amendment(s) was/were approved by the sl must be separately provided for each voting gr		
"The number of votes cast for the amenda	nent(s) was/were sufficient for approval	
by(voting	yroun)	
The amendment(s) was/were adopted by the boa action was not required.		l shareholder
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareholder	reholder
selected, by an acorporate appointed fiduciary by		
(T _y	Ped or printed name of person signing)	
	Vice Presiden	<u> </u>
	(Title of person signing)	