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POLOOD	01559777
(Requestor's Name) (Address) (Address)	500317553615
(City/State/Zip/Phone #)	08/24/1801008001 **35.00
(Business Entity Name) (Document Number)	
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION:	HG	FREIGHT	INC.
DOCUMENT NUMBER:	06,0001	55977	

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

Please return all correspondence concerning this matter to the following:

HELTOR GONZALEZ
Name of Contact Person
HG FREIGHT INC.
Firm/ Company
2219 NE 123 STREEF
Address
NORTH MIAMI
City/ State and Zip Code
haf 1427 cyahao. com

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

For further information concerning this matter, please call:

HECTUR GONZALEZ at (305, 370-2432 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

□\$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

	Articles of Amendment	FILED
	Articles of Incorporation of	2018 AUG 24 PM 2:27
	G FREIGHT INC. tion as currently filed with the Florida Dept. o	SECRETARY OF STATE
	000155977	,
	ament Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	da Statutes, this <i>Florida Profit Corporation</i> adop	ots the following amendment(s) to
A. If amending name, enter the new name of the o	corporation:	
		TheThe
name must be distinguishable and contain the we "Corp" "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	p, " "Ine," or "Co", A professional corporation	ted" or the abbreviation on name must contain the
B. Enter new principal office address, if applicab	1e: 2219 NE	123 ST.
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	DDRESS) NORTH MIAN	11, ñ 33181
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	0x 2219 NC 1:	2357-
	NORTH MIAN	41, FC 33181
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered	ered office address in Florida, enter the name d office address:	of the
Name of New Registered Agent H	ECTOR Y. GONZALEZ	
2.	ECTOR Y. GONTALEZ 219 NE 123 ST. IFlorida street address)	
	<u>RTH MIAMI</u>	

· · ·

<u>New Registered Agent's Signature, if changing Registered Agent:</u> الأم / A 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

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 Clork; 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 mainer. 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: John Doc PT X Change Mike Jones Y X Remove <u>sv</u> Sally Smith <u>X</u> Add Address Title Name Type of Action (Check One) HECTOR 4. GONZALEZ 2219 NE 123 ST. 1) V Change NORTH MIAMI, Fr 33181 _____. Add ____ Remove 2) ____ Change ____ Add Remove 3 | ____ Change _. __ Add ____ Remove 4) ____ Change _____Add ____ Remove 5) ____ Change ____ Add _____ Remove 6) ____ Change ____ Add ____ Remove

E. If amending or adding additional Articles, enter change(s) here: $\mathcal{N} | \mathcal{A} \setminus \mathcal{A}$ (Attach additional sheets, if necessary). (Be specific)

. .

The date of each amendment(s) add date this document was signed.	option: N/A	, if other than
Effective date <u>if applicable</u> :		fier amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable sta	tutory filing requirements, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number Ticient for approval.	of votes cast for the amendment(s)
The amendment(s) was/were appr must be separately provided for e	roved by the shareholders through vot each voting group entitled to vote sep	ing groups. The following statement arately on the amendment(s):
"The number of votes cast f	for the amendment(s) was/were sufficient	ent for approval
by		······································
	(voting group)	
The amendment(s) was/were adoption was not required.	pted by the board of directors without	shareholder action and shareholder
The amendment(s) was/were adopaction was not required.	pted by the incorporators without sha	reholder action and shareholder
Dated A	VEUST 20, 2018	
······		
Signature	irector president or other officer - if	linetoni en officen, huve not heru
	I by an incorporator – if in the hands	
appoint	ed fiduciary by that fiduciary)	
	HECTO2 GONT	
	(Typed or printed name of	
	PRISDANT	
	(Title of persi	n ciunina)