P07000078960

(Re	equestor's Name)			
(Ac	idress)	<u> </u>		
(Ac	idress)	 		
(Ci	ty/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

uno 5, 2021

Filis tiji j

June 5, 2021

SAMUEL SANTIESTEBAN 13117 BOULDERWOODS CIR ORLANDO, FL 32824 US

SUBJECT: SM TRUCKING EXPRESS INC

Ref. Number: P07000078960

We have received your document for SM TRUCKING EXPRESS INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 421A00010556

Articles of Amendment to Articles of Incorporation of

SM TRUCKING EXPRESS INC.

(N) = EC	VP. WALL BY JIHEAMA LO LOS LOS LOS LOS LOS LOS LOS LOS LOS	
(<u>Name of Corporation as curren</u> 207000078960	tly filed with ARFFIRMa Dept. of State)	
	of Corporation (i	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment	
A. If amending name, enter the new name of the corporation:		
	The new	
ame must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
Enter new principal office address, if applicable:	13117 BOULDER WOODS CIR	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	ORLANDO FLORIDA32824	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address 		
Name of New Registered Agent	-	
	7=	
(Florida s	trect address)	
New Registered Office Address:	Florida	
	(Cuy) (Zip Code)	
	_	
ew Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	
hereby accept the appointment as registered agent—I am familiar	with and accept the obligations of the position.	
Signature of New 1	Registered Agent, if changing	

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doe	
•		·	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	PRES	SAMUEL SANTIESTEBAN	146 CHICAGO WOODS CIR
Add			ORLANDO FLORIDA32824
X Remove			
2) Change	PRES	DENNIS MARRERO	13117 BOULDER WOODS CIR
X Add			ORLANDO FLORIDA 32824
Remove 3) Change			
Add			
Remove			
4) Change		.	
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

(Attach <i>additio</i>	r adding additional Articles, enter change(s) here: nal sheets, if necessary). (Be specific)	
A RETIRED AN	D PASS OVER MY BUSINESS. TO PERSUE OTHER VENTURES	
		-
		
		-
· -		
		
If an amendm	ent provides for an exchange, reclassification, or cancellation of issued shares,	
(if not an	r implementing the amendment if not contained in the amendment itself: plicable, indicate N/A)	
1,0 1,7		

	02/25/2021	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
02/25	/2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this bl document's effective date on the Dej	ock does not meet the applicable statutory filing reartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	nted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes cast ficient for approval.	for the amendment(s)
	oved by the shareholders through voting groups. Track voting group entitled to vote separately on the	
"The number of votes east	or the amendment(s) was/were sufficient for appro-	val
by		··
	(voting group)	
Dated		
Signature		
(By a di selected	ector, president or other officer – if directors or off, by an incorporator – if in the hands of a receiver, and fiduciary by that fiduciary)	
	SAMUEL SANTIESTEBAN	
•	(Typed or printed name of person signin	g)
	PRESIDENT	
•	(Title of person signing)	