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IO: Amendment Section		
Division of Corporations		
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NAME OF CORPORATION: Kelsey Blub	in Trucking, Inc.		
DOCUMENT NUMBER:	V		
The enclosed Articles of Amendment and fee are submitted for	filing.		
Please return all correspondence concerning this matter to the	following:		
Kelsey Blub 24553 SE Hu Umatilla FL	Davenport of Contact Person MTrucking Tnc. m/Company y. 450 Address 32784 ate and Zip Code		
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
John Davenport Name of Contact Person	at (352) (036-1653 Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to	the Florida Department of State:		
Certificate of Status Certificate	5 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

to

Articles of Incorporation

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Tolson Rubo Tru	icking Try.
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P1711115 126	26-1514704
(Document Number of	of Corporation (if known)
(Document Number C	n Corporation (it known)
Pursuant to the provisions of section 607.1006, Florida Statutes. this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or $Co.$," or the designation "Corp.," "Inc," or "word "chartered," "professional association," or the abbreviation "	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Λ
	(7 30 70 = 3
C. Enter new multipe address if applicables	—————————————————————————————————————
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
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	7 7
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
new registered agent and/or the new registered office address	<u>s:</u>
Name of New Registered Agent	V_/_
·	V/A
(Florida st	reet address)
New Registered Office Address:	(City) (Zip Code)
	(city)
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent. I am familiar	
<u> </u>	
Signature of Man I	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)

Example:

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 John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Address</u>
1) Change	V Cheryl Davenpact	
Add	,	
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		
Kemove		

(Attach <i>additional s</i>	ing additional A seets, if necessary	rticles, enter chan). (Be specific)	ge(s) nere:			
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lf an amendment ը provisions for imյ	rovides for an ex	change, reclassific	ation, or cancella	tion of issued sh	iares,	
(if not applica	ole, indicate N/A)	nenament it not co	miamed in the an	tenament itsett.		
						_
		N//				_
		Y/A	. <u> </u>			_
		17				
		C				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 7 - 1 - 2017 (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	will not be listed as the
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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	1
"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 9//8//7	
Signature A D	
(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)	
Tohn M. Davenport (Typed or printed name of person signing)	
Prosident	
(Title of person signing)	