

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : THE ELITE CARRIER SERVICES OF MIAMI LLC

Account Number : I20120000040

Phone : (305) 405-2600

Fax Number : (305)405-2601

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ODEGOVA TRUCKING, INC

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OCT 25 2018

COVER LETTER

TO: Amendment Secti Division of Corpo			
NAME OF CORPOR	ATION: ODEGOVA TRU	CKING JNC	
DOCUMENT NUMB	BER: P07000125058		···
	of Amendment and fee are so	abmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	SUYLEN RUBIO		
·		Name of Confact Perso	n
	THE ELITE CARRIER SEF	RVICES OF MIAMI	
•	_	Firm/ Company	
	12060 NW S RIVER DR	Pinho Company	
•	<u> </u>	Address	
	MEDLEY, PL 33178	7144.533	
•		City/ State and Zip Cod	e
SRUE	BIO@ELITECSOM.COM		
	=	sed for future annual report	notification)
	Manual address. No be a	sou for fattire attribute toport	nonneanony
For further information	concerning this matter, plea	se call:	
SUYLEN RUBIO		at (405-2600
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
\$35 Filling Pee	□\$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 18 enclosed)
Amer Divis P.O.	ing Address indiment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section in of Corporations Building xecutive Center Circle issee, FL 32301

No. 2551 P. 3 FILED

2018 OCT 24 AM 9: 47

SECRETARY OF STATE TALLAHASSEE, FL

Articles of Amendment to Articles of Incorporation of

ODEGOVA TRUCKING, INC	
(Name of Corporatio	n as currently filed with the Florida Dept, of State)
207000125058	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Plorida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
•	The new
	" "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
B. <u>Enter now principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	d office address in Florida, enter the name of the Mice address;
Name of New Registered Agent	
	(Fiorida street address)
New Registered Office Address:	
	(City) (Ztp Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agents am familiar with and accept the obligations of the position.
Signal	ure 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 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>	Mike Jones			
_X Add	<u>şv</u>	Sally Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
l) Change	S	FERNANDO A MOLINA	8949 SW 172 AVE APT 1534		
X Add			MIAMI, FL 33196		
Remove					
2) Change					
Add			-		
Remove					
3) Change	-	_			
Add					
Remove					
4)Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

	ling or adding additional Articles, dditional sheets, if necessary). (B	specific)	
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	**-*		
	·-		
Can am	endment provides for an exchange	. reclassification, or concellatio	n of issued chares
provisio	ons for implementing the amendme	eut if not contained in the amen	dment itself:
(if n	not applicable, indicate N/A)		
()	,		

The date of each amendment(s) ad	option:	<u> </u>		* *	if ol	ther than
date this document was signed.						
Effective date if applicable:				· :		
	(no more the	an 90 days after	amendmant file	date)		
Note: If the date inserted in this b document's effective date on the De			y filing require	entents, this date wil	i not be	listed as
Adoption of Amendmeni(s)	(CHECK ONE)		• • • •	٠		
The amendment(s) was/were ado by the shareholders was/were su		The number of	rolus cost for th	e amendment(s)		· .
The amendment(s) was/were app must be separately provided for	roved by the shareholders each voting group entitles	through voting (d to vute separat	groups. The fol ely on the amer	lowing statement idment(s):	,	,
"The number of votes cast	for the amendment(s) was	/were sufficient (or approval			
by	<u> </u>		n			
	(voting group)	•				, .
The amendment(s) was/were add action was not required.	pted by the board of direc	tors without shar	cholder action	and shareholder	: -	
☐ The amendment(s) was/were add action was not required.	pted by the Incorporators	without sharehol	der action and s	hnreholder		
OCTOBER Dated	24,2018					,
Slgnature X	lity					
(By a d selecte	isctor/president or other to by an incorporator - If I and I iduciary by that fiduciary	in the hands of a l	ors or officers l receiver, trustee	nave not been , or other court	<u> </u>	
٠	NATALIA SOTOLONG	0		•		
	(Typed or prin	ted name of pers	on siguing) .			. .
•	PRESIDENT	•				
	· · · · · · · · · · · · · · · · · · ·	itic of person sie	olne)	.	- ··	<u> </u>