P07000/30/58

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400305081504

10/30/17--01012--006 **è5.00

2017 OCT 30 AM 11: 65

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ALL TRUCK COR	(r 	
DOCUMENT NUM	1BER: P07000130158		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	ALEJANDRO GONZALEZ		
		Name of Contact Person	1
	ALL TRUCK CORP		
		Firm/ Company	
	2986 LOWERY DRIVE		
		Address	·
	OVIEDO, FL. 32765		
		City/ State and Zip Code	e
ALI	LTRUCK2014@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, please	se call: at (796-3116
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
	for the following amount made		
S35 Filing Fee	S43.75 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)
Ar Di	ailing Address mendment Section vision of Corporations Q. Box 6327 Massee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Arti

ALL TRUCK CORP

ticles of Amendment	_	
to	•	
icles of Incorporation		
òf .		
•		

(Name of Corporation as currently filed with the Florida Dept. of State)	
P07000130157	11.9
(Document Number of Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amits Articles of Incorporation:	endment(s) to
A. If amending name, enter the new name of the corporation:	
The	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conte word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	i
	 i
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Maning address MAT BE A FOST OFFICE BOX)	
	
·	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code,	1
New Registered Agent's Signature, if changing Registered Agent:	
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	

address of each Office (Attach additional sheet Please note the officer/o P = President; V = Vico Executive Officer: CFO held. President, Treasur Changes should be note a change, Mike Jones lo Mike Jones, V as Remon	r and/or I. s. if neces. lirector title Presiden = Chief rer, Direct d in the fo	Director lesary) le by the f t; T= Tre Financial or would blowing n corporation	neing added: Since the office title: Seasurer; S= Secretary; D= Director; To Officer. If an officer/director holds n be PTD. Sonanner. Currently John Doe is listed as on, Sally Smith is named the V and S. To	R= Trustee: C = Chairman or Clerk; CEO = Chief nore than one title, list the first letter of each office is the PST and Mike Jones is listed as the V. There is these should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally S	•	
Type of Action (Check One)	Title		Name	Address
1) Change	VP		MARCEL GONZALEZ	3965 TOWN CENTER BLVD
X Add		_		#438
Remove				ORLANDO, FL. 32837
2) Change Add				
Remove 3) Change		_		
Add				
4) Change		_		
Remove 5) Change		_		
Add Remove				
6) Change		_		

__ Remove

amending or adding additional Articles tach additional sheets, if necessary). (B	e specific)	
	•	
		
		
· ·		<u>†</u>
	· · · · · · · · · · · · · · · · · · ·	
		1
		
		i
		
		ļ
an amendment provides for an exchang	e, reclassification, or cancellation of issued shares,	
provisions for implementing the amendm (if not applicable, indicate N/A)	ent if not contained in the amendment itself:	
ty an apparation, mature tria)		
		
		ì
_		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (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.	e 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.	1
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	11
"The number of votes east for the amendment(s) was/were sufficient for approval	
hy" (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 [011 2017	
(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)	
(Typed or printed name of person signing)	
*	
(Title of person signing)	