## P08000062564

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| PICK-UP                 | WAIT               | MAIL        |
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| (0)                     | cument Number)     |             |
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| Certified Copies        | _ Certificate:     | s of Status |
| Special Instructions to | Filing Officer:    |             |
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SECRETARY OF STATE DIVISION OF CORPORATIONS

02914

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| AME OF CORPORATION: Reyn's Trucking Jac                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| OCUMENT NUMBER: P08000 62564.                                                                                                                                                                                                                                    |
| ne enclosed Articles of Amendment and fee are submitted for filing.                                                                                                                                                                                              |
| Page of Contact Person                                                                                                                                                                                                                                           |
| Film/Company Film/Company Address Address                                                                                                                                                                                                                        |
| City/ State and Zip Code                                                                                                       |
| Name of Contact Person  Person  at ( 305 ) 226-2555  Area Code & Daytime Telephone Number                                                                                                                                                                        |
| nclosed is a check for the following amount made payable to the Florida Department of State:                                                                                                                                                                     |
| \$35 Filing Fee  Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  Certificate of Status  Certificate of Status  Certificate Copy  (Additional Copy is enclosed) |
| Mailing Address Street Address                                                                                                                                                                                                                                   |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

FILEU SECRETARY OF STATE DIVISION OF CORPORATIONS

| •                                                                                                                                           | to                                     |                                                   | MAISING OF COM COM                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------|--------------------------------------------------------|
|                                                                                                                                             | Articles of Incorporati                | on                                                | 14 DEC -1 AM 11: 09                                    |
| $\Omega$                                                                                                                                    | ていっての                                  |                                                   |                                                        |
| (Name of Corporation as curren                                                                                                              | tly filed with the Florida D           | ent of State)                                     | <del></del>                                            |
| Pau                                                                                                                                         | mento stat                             | spir or state                                     |                                                        |
| (Document Numl                                                                                                                              | per of Corporation (if known)          | <u> </u>                                          | <del></del>                                            |
| Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:                                                            | Torida Statutes, this <i>Florida I</i> | Profit Corporation adop                           | ts the following amendment(s) to                       |
| A. If amending name, enter the new name of t                                                                                                | the corporation:                       |                                                   |                                                        |
| name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," of | 'Corp," "Inc," or "Co". A              | npany," or "incorporat<br>professional corporatio | The new red" or the abbreviation name must contain the |
| B. Enter new principal office address, if appli<br>(Principal office address MUST BE A STREET                                               |                                        | •                                                 |                                                        |
|                                                                                                                                             | _ <del></del>                          |                                                   |                                                        |
| •                                                                                                                                           | ,<br>                                  | <del></del>                                       |                                                        |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC                                                           | <u>E BOX</u> )                         |                                                   |                                                        |
|                                                                                                                                             |                                        |                                                   | ···                                                    |
| D. If amending the registered agent and/or re                                                                                               | egistered office address in F          | lorida, enter the name                            | of the                                                 |
| new registered agent and/or the new regis                                                                                                   | tered office address:                  | . N                                               |                                                        |
| Name of New Registered Agent                                                                                                                | Nayraldo K                             | Vazquz.                                           |                                                        |
| _200                                                                                                                                        | 5 Bright DR<br>(Florid) street address | ss)                                               | _                                                      |
| New Registered Office Address:                                                                                                              | Hialeah (City)                         | , Florida                                         | <u>330€</u><br>(Zip Code)                              |
|                                                                                                                                             |                                        |                                                   | •                                                      |
| New Registered Agent's Signature, if changin                                                                                                | g Registered Agent:                    |                                                   |                                                        |
| I hereby accept the appointment as registered as                                                                                            | zent. Lan Kamiliar with and            | accept the obligations o                          | f 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 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 <math>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                | <u>Doe</u>       |                 |
|----------------------------|------------------------|------------------|-----------------|
| X Remove                   | <u>V</u> <u>Mike</u>   | <u>Jones</u>     |                 |
| _X Add                     | <u>SV</u> <u>Sally</u> | <u>Smith</u>     |                 |
| Type of Action (Check One) | <u>Tide</u>            | Name             | Address         |
| 1) Change                  | NP                     | Laurka C Nantwoo | 2005 Bright DR  |
| Add                        |                        |                  | Hislah F1 33010 |
| Remove                     |                        |                  |                 |
| -2) Change                 |                        |                  |                 |
| Add                        |                        |                  |                 |
| Remove                     |                        |                  |                 |
| 3) Change                  | <del></del>            |                  | , //B           |
| ∧dd                        |                        |                  |                 |
| Remove                     |                        |                  |                 |
| 4) Change                  |                        |                  |                 |
| Add                        |                        |                  |                 |
| Remove                     |                        |                  |                 |
| 5) Change                  |                        |                  |                 |
| Add                        |                        |                  |                 |
| Remove                     |                        |                  |                 |
| 6) Change                  | <del> </del>           |                  |                 |
| Add                        |                        |                  |                 |
| Remove                     |                        |                  |                 |

| ttach<br>LJ  | additional she  | ng additional Artic<br>ets, if necessary). | (Be specific)                            | _             | Mon           | Va C                                    | Hart         |
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| f an a       | mandmant aw     | ovides for an exch                         | anga yaalagsifaas                        | tion on annua | allatia- afia | unad abausa                             |              |
| <u>provi</u> | sions for impl  | lementing the amer                         | ange, rectassificat<br>idment if not con | tained in the | amendment     | itself:                                 |              |
| (į           | if not applicab | le, indicate N/A)                          |                                          |               |               |                                         |              |
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AMI oth & Phan the The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: amendment file date) (no more than 90 days afte 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (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. Signature (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 (iduciary by that fiduciary) (Typed or printed name of person sign