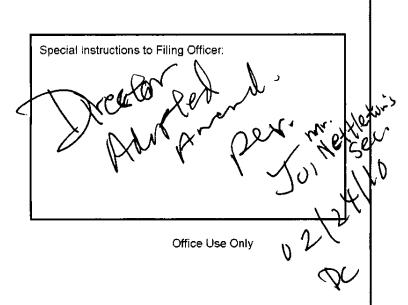
# P0900019132

•	
`	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
☐ PICĶ-U	JP WAIT MAIL
	(Business Entity Name)
	(Document Number)
ertified Copies	Certificates of Status





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MIC E. Anend.

### Robert C. Nettleton

'Attorney at Law

(863) 422-6484 Fax (863) 421-9618 30 North Sixth Street Post Office Box 277 Haines City, Florida 33845-0277

February 18, 2010

Department of State State of Florida P. O. Box 6327 Tallahassee, Florida 32314

Re: Trucksmart, Inc. being Amended to TruckItSmart, Inc.

Dear Sir:

Enclosed, please find the following instruments in the above regard:

- 1. Cover Letter to Amendment Section, Division of Corporations.
- 2. Original and two copies of Articles of Amendment to Articles of Incorporation of TRUCKSMART, INC.

Also enclosed is my check in the amount of \$43.75 representing the Filing Fee & Certificate of Status.

Please return the certified copy of Articles to this office.

Very truly yours,

Robert C. Nettleton

RCN/jn

Enclosures

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	TRUCKSMART, INC		
.  DOCUMENT NUM	MBER:	P09000019132	·	
The enclosed Article	es of Amendment and fee a	re submitted for filing.		
Please return all cor	respondence concerning thi	is matter to the following:		
_		ERT C. NETTLETON		
	N	lame of Contact Person		
_	AT	TORNEY AT LAW		
		Firm/ Company		
_	P.O. BOX 277			
		Address		
_		CITY, FLORIDA 33845		
		ity/ State and Zip Code		
	jonett@ E-mail address: (to be use	etampabay.rr.com d for future annual report notification)		
For further informat	tion concerning this matter,	please call:		
rnett	leton@msn.com	at ( 863 ) 4	22-6484	
Name o	of Contact Person	Area Code & Daytime Te	lephone Number	
Enclosed is a check	for the following amount n	nade payable to the Florida Depar	rtment of State:	
□ \$35 Filing Fee	☐ \$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 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 Circ	:le	

Tallahassee, FL 32301

### **Articles of Amendment** to **Articles of Incorporation**

# of

### TRUCKSMART, INC.

#### (Name of Corporation as currently filed with the Florida Dept. of State)

· P	09000019132			
(Document N	Number of Corporati	on (if known)		
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporatio  A. If amending name, enter the new name.	n:	CE TAILE	ofit Corporation adopts	the follo
Т	ruckltSmart, Inc.	A STATE OF THE STA	5	The new
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	in the word "corp the designation "Co	orp," "Inc," or "C	ny," or "incorporated" o". A professional cor	or the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		711 East Main	Street	
		Suite 5		
		Haines City, Fl	orida 33844	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF  D. If amending the registered agent and/ new registered agent and/or the new r	or registered office			t.
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A (Florid	da street address)		
	(City)	<u>.</u>	, Florida (Zip Code)	
New Registered Agent's Signature, if char I hereby accept the appointment as registere	nging Registered A ed agent. I am fami	liar with and accep		osition.
	Signature of New	Registered Agent, i	f 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) Title <u>Name</u> <u>Address</u> **Type of Action** □ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) N/A F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A

The date of each amendmen	t(s) adoption: February 15, 2010
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_Feb	ruary 17, 2010
	Viil S
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	NICK SHAUGHNESSY
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)