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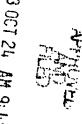


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SECREPACTOR STATE



Amend (a 10/24/13

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Andoba Rucking Inc. DOCUMENT NUMBER: P0900036627
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Andoba Trucking Inc. Name of Contact Person Mayra Garcia Firm/ Company 9657 NW South River DR Ste#4. Address Medley Fl 33166 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mayra Garcia at (305) 8538723 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$\sigma \frac{1}{2} \\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$\sigma \frac{1}{2} \\$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment

Articles of A	
to Articles of Inc	corporation
Andoba TRUCKIN	10 InC.
P090000310627	f known)
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association." 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>)	Androi Trucking Inc. 9657 NW SRIVER DE#4 Medtey FL 3311do
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Andord Trucking Inc. 9657 NW SRIVERDR#4 Medley FL 33166
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent MOYPO 9651 NW (Florida str	SCIPCIO S. RIVER DR STR#Z
New Registered Office Address: MCOLEY (Cia)	, Florida 3311de (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to Signature of New Registered Agent	with and accept the obligations of the position.
Signature of New Registered A	rgem, ij enunging

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.

Mike Jones, V as Remove Example:	e, and Sali	ly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Tuan C Romero	Juan C Romero
Add			2420W80thST#7
Remove	· 		Higlean Fl 33016
2) Change	VP	Julio CHerrande	
Add			9657 NWS. River DR#4
Remove			Medley FL 3311de.
3) Change			
Add			
Remove	_	•	
4) Change	7	Mayra Garcia	Mayra Garcia
Add		1	9657 NW S. River DEH
Remove			Medley FL 33/1de
5) Change			·
Add			
Remove			
6) Change			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
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F. <u>If an amend</u>	lment provides for an ex	change, reclassifi	cation, or cancell	ation of issued sh	ares,
if not a	for implementing the an applicable, indicate N/A)	nenament if not co	ontained in the ai	menament itseit:	
-					
		<u> </u>			
		·			

The date of each amendment(s) adoption: date this document was signed.	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
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	
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 10 23 13.	
Signature (X)	
(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)	
Mayra Garcia	
(Typed or printed name of person signing)	
tresident.	_
(Title of person signing)	