## P1000022037

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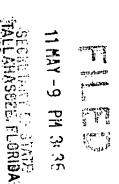
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## **COVER LETTER**

TO: Ameniment Section

Tallahassee, FL 32314

**Division of Corporations** NAME OF CORPORATION: Impact Freight Solutions Group Inc 10000022037 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Redderson Name of Contact Person Firm/ Company St Pete FL 33710
City/State ar redderson J Q qol, 6m

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727) 480-2484

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ₩ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of IMAY-9 PM 3: 36 (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

e designation "Corn" "Inc"	The n company," or "incorporated" or
ofessional association," or th	or "Co". A professional corporate e abbreviation "P.A."
olicable: ET ADDRESS )	
<u>:</u> CE BOX)	
***************************************	
registered office address in l stered office address:	Florida, enter the name of the
(Florida street add	iress)
(City)	, Florida(Zip Code)
ng Registered Agent:	(21p Code) I accept the obligations of the position
	icable: ET ADDRESS )  CE BOX)  registered office address in I stcred office address:  (Florida street address)

## 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: (Attack additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>-</u>			
			☐ Add ☐ Remove
	ding or adding additional Articles, dditional sheets, if necessary). (Be		
<u>provisi</u>	nendment provides for an exchang ons for implementing the amendme ot applicable, indicate N/A)	e, reclassification, or cancell ent if not contained in the an	ation of issued shares, nendment itself:
4			

The date of each amendme	nt(s) adoption:
	(date of adoption is required)
Effective date <u>if applicable</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s	(CHECK ONE)
The amendment(s) was/ by the shareholders was	vere adopted by the shareholders. The number of votes cast for the amendment(swere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s):
"The number of vot	s cast for the amendment(s) was/were sufficient for approval
by	."
	(voting group)
The amendment(s) was/action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/saction was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	5-4-11 0 0 0 0
Signature	I he while
S	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Tohn Redderson (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)