P1000032730

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(Ci	ty/State/Zip/Phone	#)		
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*COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: _	INTERNA	TIONAL TRUCKING SCI	HOOL, CORP
DOCUMENT NU	MBER:		P10000032930	
The enclosed Artic	les of Amendm	ent and fee are	submitted for filing.	
Please return all co	rrespondence c	oncerning this	matter to the following:	
_		TERE	SITA PLASENCIA	
		Nan	ne of Contact Person	
_	INTE	RNATIONAL	TRUCKING SCHOOL, COR	P
			Firm/ Company	
_		1117 W OKE	ECHOBEE RD SUITE 118	
٠.	,		Address	
r			A STATE OF THE THE PARTY OF THE	
2 8 - 2		Hialeah	Gardens, FL 33018	
, · -			/ State and Zip Code	
		·		
		truckschool	12@hotmail.com	
	E-mail add	lress: (to be used f	or future annual report notification)	
For further informa	tion concerning	g this matter, pl	ease call:	
·			at ()	
Name	of Contact Person		Area Code & Daytime Tel	ephone Number
Enclosed is a check	for the follow	ing amount mad	de payable to the Florida Depar	tment of State:
☑ \$35 Filing Fee	S43.75 Filin Certificate		\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendmen	t Section	Property of the second	Street Address Amendment Section	······
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circl	e	
	,		Tallahassee, FL 32301	

Articles of Amendment to

Articles of Incorporation

FILED

2011 JAN 10 A 11: 47 BECRETARY OF STATE TALLAHASSEE, FLORIDA

INTERNATIONAL TRUCKING SCHOOL, CORP

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

P10000032930

(Document Number of Corporation (if known)

	same	The new
	the designation "Corp,"	on," "company," or "incorporated" or the "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		117 W OKEECHOBEE RD SUI
		HIALEAH GARDENS, FL 33018
C. Enter new mailing address, if application (Mailing address MAY BE A POST O		•

D. If amending the registered agent and new registered agent and/or the new		
		<u> </u>
new registered agent and/or the new	Teresita Plasenci	<u> </u>
new registered agent and/or the new Name of New Registered Agent:	Teresita Plasenci	a HOBEE RD STE 118

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)

<u>Tit</u>	<u>le</u>	<u>Name</u>	Address	Type of Action
	VP	Neyva Stafford	11117 W OKEECHOBEE RD Hialeah Gardens, FL 33018	Add Remove
				☐ Add ☐ Remove
_				Add Remove
E. (If amending (attach addi	g or adding additional Articles, enter tional sheets, if necessary). (Be speci		
F.	provisions	dment provides for an exchange, rec for implementing the amendment if a applicable, indicate N/A)		