## P10000088938

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JUN 1 1 2017 D CUSHING

## **COVER'LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: EXPRESS FORK	LIFT SERVICE, INC			
DOCUMENT NUME	BER: P10000088938				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	atter to the following:			
	GONZALEZ, CARLOS E				
•		Name of Contact Perso	on		
	EXPRESS FORKLIFT SER				
		Firm/ Company			
	5406 NW 10TH TERRACE	ramii Company			
		Address			
FORT LAUDERDALE, FL 33309					
•		City/ State and Zip Co	de		
EXPR	ESSFORKLIFTSERVICE@	GMAIL.COM		ر .	
	E-mail address: (to be us	sed for future annual repor	: notification) —	<u>بن کے سمب</u>	
For further information	concerning this matter, please			198 of 6	• • • • • • • • • • • • • • • • • • • •
CARLOS E GONZAL	EZ	at (	2426455		-
Name of Contact Person		Area C	ode & Daytime Telephone Number	- 9. CST	
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment of State:	S AND	
■ \$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)	ট	
Amer Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amen Divisi Clifto 2661	t Address dment Section on of Corporations n Building Executive Center Circle nassee, FL 32301		



May 17, 2017

CARLOS E GONZALEZ EXPRESS FORKLIFT SERVICE INC 5406 NW 10TH TERRACE FORT LAUDERDALE, FL 33309

SUBJECT: EXPRESS FORKLIFT SERVICE, INC.

Ref. Number: P10000088938

We have received your document for EXPRESS FORKLIFT SERVICE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 817A00009916

## Articles of Amendment Articles of Incorporation of

the Florida Dept. of State)  (if known)  The now, " or "incorporated" or the abbreviation and corporation name must contain to	ew on
The now," or "incorporated" or the abbreviati	ew on
The now," or "incorporated" or the abbreviati	ew on
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v," or "incorporated" or the abbreviati	on
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a, enter the name of the	F STAI
3	
	(C)
33309	
, Florida(Zip Code)	-
• •	
-	, Florida 33309

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.

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	VP	PENA , FRANCISCO , Jr.	5406 NW 10TH TERRACE
Add		•	FORT LAUDERDALE, FL 33309
X Remove			<del></del>
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		<del>-</del>	
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
N/A	•
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

05/05/2017	20 11 11 11
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)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	te will not be listed as the
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.	3)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemed must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"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.	e <b>r</b>
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
05/05/2017 Dated	
Signature Caular Counciles	
(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 cour	t .
appointed fiduciary by that fiduciary)	•
GONZALEZ, CARLOS E	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	