P120000035182

(Re	questor's Name)	
(Ad	dress)	***************************************
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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05/17/12--01025--006 **43.75

CIVISION OF CORPORATIONS

Manuchy (105/31/12)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: GOO	D Time 7	TRUCK-IN, IN
DOCUMENT NUME	BER: P/200C	032182	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
•	Helen	Name of Contact Person 65 TAd: ACC Firm/ Company	
		Name of Contact Persor	1
	Bock Spein	65 TAd: AC	CTOUNTING, LINE
	,	Firm/ Company	•
	13 E, TAN	Address	DC
	_	Address	
	APOREA N	City/ State and Zip Code	<i>う</i>
		City/ State and Zip Code	c <u>f</u>
	Ilcinson (AOL Com	Ť
All the Control of th		sed for future annual report	notification)
			,
For further information	n concerning this matter, pleas	se call:	
/	, , , , ,	_	
1-10/ex	TONE	at (407	, 880-4300
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	navable to the Florida Depa	artment 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 Street Address			
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			
Tallahassee, FL 32314 Control Building . 2661 Executive Center Circle		<u> </u>	

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 21, 2012

HELEN JONES ROCK SPRINGS TAX & ACCOUNTING 13 E. TANGLEWOOD DR APOPKA, FL 32712

SUBJECT: GOOD TIME TRUCK-IN, INC.

Ref. Number: P12000035182

We have received your document for GOOD TIME TRUCK-IN, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please provide us with an email address for this business entity. The Division of Corporations sends important reminders and notices to those business entities that have provided our office with an email address. Make sure your entity receives these helpful communications by providing our office with an active email address.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Irene Albritton
Regulate Specialist II

Letter Number: 412A00014849

Articles of Amendment to Articles of Incorporation



	Articles of incor	poration			
	of	7.16	Ĩ.		
(Name of Corporation as curre	PLUCE - IN.				
P1200003518	• • •	nan Departor State)			
	ber of Corporation (if k	nown)		,	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this <i>Flo</i>	orida Profit Corporat	ion adopts the following	g amendmen	t(s) to
A. If amending name, enter the new name of					
ame must be distinguishable and contain the	RUCKIN'I	ENC.		_The new	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp." "Inc." or "Co	o". A professional co	ncorporated" or the aborporation name must o	bbreviation contain the	
B. Enter new principal office address, if app	licable:	NA	* *	_	
(Principal office address MUST BE A STREE		. , -		<i>,</i>	
			**	-	
			·		
C. Enter new mailing address, if applicable:		_		12	
(Mailing address MAY BE A POST OFFIC		NA			Sign
			•	HAY 31	26 93
			•		SX
				_ ₹	200
D. If amending the registered agent and/or r new registered agent and/or the new regis	egistered office addres stered office address:	s in Florida, enter ti	e name of the	7.29	RATIO
Name of New Registered Agent	J A				5
	(Florida street	ı address)			
New Registered Office Address:		F	lorida		
Hen hegistered office radiress.	(City)	······································	(Zip Code)	-	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		th and accept the obli-	gations of the position		
veg wevept the appointment da registered w	o 1 s / s / 1111	sana accopi me oon,	Sample of the bosinois		

Signature of New Registered Agent, if 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)

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.

Example: 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>	Address
1) Change Add Remove			
2) Change Add Remove			***
3) Change Add Remove		_	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	
八角	•	
		[a].
		5.
		-
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancella indment if not contained in the am	tion of issued shares, endment itself:
NA		
		
	· · · · · · · · · · · · · · · · · · ·	
	·	

The date of each amendm	ent(s) adoption: May 25, 2012	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
	were adopted by the shareholders. The number of votes cast for the amendment(s) /were sufficient for approval.	
	were approved by the shareholders through voting groups. The following statement yided for each voting group entitled to vote separately on the amendment(s):	
"The number of vo	otes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/action was not required.	were adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/action was not required.	were adopted by the incorporators without shareholder action and shareholder	
Dated	5-29-2012	
_		
Signature	(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)	
	MICHAEL Fleming (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	