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Office Use Only



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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	<sub>n:</sub> mq truckir	ng corp	
DOCUMENT NUMBER:	0 12000092	751	
The enclosed Articles of Am			
Please return all corresponde	nce concerning this ma	tter to the following:	
jos	e moquete		
<u>=</u>		Name of Contact Person	n and a second
mq	trucking co		
·		Firm/ Cor pany	
132	25 w. doneg	an ave # c	
		Address	
kio	nimmoo fl		
KIS:	simmee , fl .		
		City/ State and Zip Cod	e
mgtru	ckingcorp@	gmail.com	
		ed for future annual report	notification)
For further information conc	erning this matter, pleas	se call:	
jose moquete		<sub>at (</sub> 407	<u>) 850-1685</u>
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount made	payable to the Florda Dep	artment of State:
\$35 filing Fee	1\$43,75 Filing Fea & Cartificate of Status	□\$43.75 Filing Fee & Certified Copy (A. dittional copy is enclosed)	S52.50 Filing Fee Cortificate of Status. Cortified Copy (Additional Copy is enclosed)
Mailing A	ıldress	Street	Addres.
Amendme		Amenamens Section	
	f Corporations	Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, Fl. 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flor	ida Dept. of State)
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	erida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
·	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co," or the designation "Corp," "Inc." or "Coword "chartered," "professional association," or the abbreviation "P	"company." or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	W-7 PM 2:53
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	<u> </u>
(Florida street	address)
New Registered Office Address;	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit  Signature of New Registered Agent	

## 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 Cterk; 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>	<u>John D</u>	<u>loe</u>	
X Remove	<u>V</u>	Mike J	ones	
X Add	<u>sv</u>	<u>Sally S</u>	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	secretary		carmen garcia	1325 w. donegan ave #c
X Ada	,	<del>.</del>		kissimmee ,fl.34741
Remove			•	
2) Change		<del></del>		
Add				
Remove				
3 ) Change				
, Add		•		
Remove				
4) Change				
Add				
Remove				
.5) Change		<b>-</b> •		
A.dd				
Remove			•	
6) Change		_		
Add				
Donvova				

amending or adding additional Arti ttach additional sheets, if necessary).	
	<del></del>
	•
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument is not contained in the amendment itself.
	*
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) add	option: 01-07-13
Effective date if applicable: Sar	ne
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adop by the shareholders was/were suff	ited by the shareholders. The number of votes east for the amendment(s) ficient for approval.
☐ The amendment(s) was/we:e appromust be separately provided for e	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
Dated 01-C5- Signature (By a diviselected	rector president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
<u>i</u>	ose moquete
	(Typed or printed name of person signing)
. !	owner / president
•	(Title of person signing)