

7/23/13

Jul 24 2013 9:51AM

MCI TREATMENT

Division of Corporations

No. 7826 P. 2

**P12000164636**

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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(((H13000164636 3)))



H13000164636ABC/

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : A &amp; L CARRIER SERVICES INC.

Account Number : I20110000033

Phone : (786) 360-2879

Fax Number : (786) 362-5270

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 JUL 24 PM 2:31

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: alcinc@aol.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
ELVYS TRUCKING ENTERPRISE INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

C. LEWIS

JUL 24 2013

EXAMINER

Jul 24, 2013 9:51AM

MCI TREATMENT

No. 7826 P. 1



July 24, 2013

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

ELVYS TRUCKING ENTERPRISE INC.  
11117 W OKEECHOBEE RD  
203-204  
HIALEAH GARDENS, FL 33018

SUBJECT: ELVYS TRUCKING ENTERPRISE INC.  
REF: P12000103156

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

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

Carolyn Lewis  
Regulatory Specialist II

FAX Aud. #: H13000164636  
Letter Number: 413A00017879

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

COVER LETTER

TQ: Amendment Section  
Division of Corporations

NAME OF CORPORATION: ELVYS TRUCKING ENTERPRISE INC.

DOCUMENT NUMBER: P12000103156

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA CARIDAD HERNANDEZ

Name of Contact Person

ELVYS TRUCKING ENTERPRISE INC

Firm/ Company

6831 SW 6 ST

Address

MIAMI FL 33144

City/ State and Zip Code

ALCSINC@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

A & L CARRIER SERVICES INC

Name of Contact Person

at ( 786 ) 360-2879

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 &  
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

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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Articles of Amendment  
to  
Articles of Incorporation  
of

13 JUL 24 PM 2:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ELVYS TRUCKING ENTERPRISE INC

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

P12000103156

(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:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

6831 SW 6 ST  
MIAMI FL 33144

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

6831 SW 6 ST  
MIAMI FL 33144

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent MARIA CARIDAD HERNANDEZ

6831 SW 6 ST

(Florida street address)

New Registered Office Address: MIAMI, Florida 33144  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



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:

☒ Change      PT      John Doe  
☒ Remove      V      Mike Jones  
☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	P	MARIA CARDID HERNANDEZ	6831 SW 6 ST MIAMI FL 33144
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: JULY 24 2013  
date this document was signed.

Effective date if applicable: JULY 24 2013  
(no more than 90 days after amendment file date)

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.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"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.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated JULY 24 2013

Signature Maria Hernandez  
(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)

MARIA CARIDAD HERNANDEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)