P13000009818

(Re	equestor's Name)
(Ād	idress)
(Ad	dress)
(Cit	ty/State/Zip/Phone #)
(Bu	usiness Entity Name)
(Dc	ocument Number)
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05/18/18--01024--032 **43.75

FILED DIVISION OF CORPORATIVE



COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: MDD TRUCKING INC

DOCUMENT NUMBER: P13000009818

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

Please return all correspondence concerning this matter to the following:

EDVIN PRIFTI

Name of Contact Person

MDD TRUCKING INC

Firm/ Company

4474 HUNTERS HAVEN LANE EAST

Address

JACKSONVILLE, FL 32224

City/ State and Zip Code

NAGDAY@AOL.COM

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

For further information concerning this matter, please call:

EDVIN PRIFTI

Name of Contact Person

at (904) 5359534 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) FILE

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<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of



MDD TRUCKING INC (Name of Corporation as currently filed with the Florida Dept. of State) P13000009818 (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 protessional 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Fiorida 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 with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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: <u>X</u> Change	<u>PT</u>	John Doe	
<u>X</u> Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		<u> </u>	
Add			
Remove			
2) Change			
Add			
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
o) Change			
Add			
Remove			

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E.	If amending or adding additional Art	ticles, enter change(s) here:
	(Attach additional sheets, if necessary).	(Be specific)
TI	IE NEW TAX ID FOR THE CORPORT	TATION IS 46-1924781

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)

	02/02/2018
The date of each amendment(s) ado date this document was signed.	ption:, if other than
02/02/	2018
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be listed as artment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adop by the shareholders was were suff	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.
	wed by the shareholders through voting groups. The following statement web voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were adop action was not required.	ed by the board of directors without shareholder action and shareholder
The amendment(s) was/were adop action was not required.	ed by the incorporators without shareholder action and shareholder
05/14/2018	
Dated	duin prof 1
selected.	etor, president of other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court 1 fiduciary by that fiduciary)
ſ	DVIN PRIFTI
-	(Typed or printed name of person signing)
F	RESIDENT

. . . .

(Title of person signing)