P130000/4449

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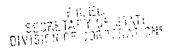
c.V.3975

COVER LETTER

TO: Amendment Sect Division of Corp							
NAME OF CORPORATION: RONEMI TRUCKING CORP							
DOCUMENT NUMI	_{BER:} P1300001444	9					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.					
Please return all corre	spondence concerning this ma	tter to the following:					
	DEVON P DONA	LDSON					
		Name of Contact Person	1				
	Firm/ Company						
	120 SOUTH AND	KA AVENUE					
	Address						
	AVON PARK, FL	ORIDA 33825					
		City/ State and Zip Cod	e				
DPD@GEODEVINC.NET							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
To further information concerning this matter, please can.							
DEVON P D	ONALDSON	at (863	453-2335				
Name of Contact Person 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 Street Address							
Amendment Section Amendment Section							
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building							
Tallahassee, FL 32314 Childing 2661 Executive Center Circle							

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



RONEMI TRUCKING CORP

15 APR 23 PM 2: 43

(Name of Corporation as	s currently filed with the Fl	orida Dept. of State)	
P13000014449			
(Docume	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or "C	," "company," or "incorporated" or the Co". A professional corporation name mus P.A."	abbreviation st contain the
B. Enter new principal office address,	if applicable:	3080 CR 665	
(Principal office address MUST BE A S		ONA, FL 33865	_
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		3080 CR 665	
(maining address MAT BE AT OST OTTTCE DOA)		ONA, FL 33865	,
			<u> </u>
D. If amending the registered agent are new registered agent and/or the ne			
Name of New Registered Agent	LORRAINE SMI		
3080 CR 665			
	(Florida stre	,	
New Registered Office Address:	ONA	, Florida 33865	
	(City)	(Zip Code)	
<u>Lov</u>	tered agent. I am familiar w Nave Smill	ith and accept the obligations of the position	1.
Si	gnature of New Registered A	gent, 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 Do	<u>0e</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	PD	_	ADOLFO Y ALONSO	941 NORTH 70 TERRACE
Add				HOLLYWOOD, FL 33024
Remove				
2) Change	PD		JIMMIE.L SMITH	3080 CR 665
Add				ONA, FL 33865
Remove			•	·
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				Add of the Control
6) Change				
Add		_		
Remove				
I INCHIOVE				

ttach additional sheets, if necessa	ry). (Be spec	ific)		
			-	
			<u></u>	
				
	 			
			··· -	
				
an amendment provides for an	avchanga raci	assification or	cancellation of i	sened chares
provisions for implementing the	amendment if	not contained in	n the amendmen	t itself:
(if not applicable, indicate N/.	<i>A</i>)			· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·		
			-	· · ·

# 1 F F	EEDDUADY 44, 0045	SEC DEX	eri Stanon erikans Kabupatèn Baranda
The date of each amendmen	t(s) adoption: FEBRUARY 11, 2015	DIVISIEN UF GAR	if other than the
date this document was signed		15 APR 23	PM 2: 43
Effective date <u>if applicable</u> :	FEBRUARY 11, 2015		
	(no more than 90 days after amen	idment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes ere sufficient for approval.	cast for the amendment(s)	
	re approved by the shareholders through voting group ed for each voting group entitled to vote separately or		t
"The number of vote	s cast for the amendment(s) was/were sufficient for ap	proval	
by			
	(voting group)		
The amendment(s) was/we action was not required.	re adopted by the board of directors without sharehold	der action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder as	ction and shareholder	
Dated APF	RIL 10, 2015		
Signature _	Jimie L Snill		•
S	By a director, president or other officer – if directors of elected, by an incorporator – if in the hands of a receive ppointed fiduciary by that fiduciary)		
	JIMMIE L SMITH		
	(Typed or printed name of pe	rson signing)	
	PRESIDENT		
	(Title of person signi	ng)	