## P130000031553

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ROY TOWING S	SERVICES INC
DOCUMENT NUMBER: P13000031853	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
ROY SUAREZ	
	Name of Contact Person
<del></del>	Firm/ Company
17801 SW 105TH AVE	
	Address
MIAMI, FL 33157	
<del></del>	City/ State and Zip Code
ALEX@SUAREZ-BASTER.COM	A
•	used for future annual report notification)
L-man address. (to be t	iscu for facure annual report normeation)
For further information concerning this matter, plea	ase call:
ROY SUAREZ	at (305 885-9846
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 \$Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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

## Articles of Amendment to Articles of Incorporation of

ROY TOWING SERVICES INC (Name of Corporation as currently filed with the Florida Dept. of State) P13000031853 (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: ROY TRANSPORT INC 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) 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 (Florida street address) , Florida New Registered Office Address: (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: 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)	Title	<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			
Damoua			

Attach additional sheets, if necessary).	(Be specific)
f an amandmant neovidas for an aych	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

<b></b>	, 06/13/16	
The date of each amendment		, if other than the
date this document was signed		
Effective data if applicable.	06/13/16	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this che Department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment ere sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statened for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	,,,	
,	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and sharehold	ter
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated O	113/2016	
Signature	V- **	
Signature'	by a director, president or other officer – if directors or officers have not been	
	lected, by an incorporator — if in the hands of a receiver, trustee, or other cou	
	pointed fiduciary by that fiduciary)	1111
~1	political reasons, by that reasons,	
	ROY SUAREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	