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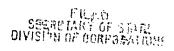
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Y & C TRUCKING	G CORP				
	IBER: P13000073017					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	NELLY COUTO					
		Name of Contact Person	1			
	DAKOTA ACCOUNTING SERVICES INC.					
		Firm/ Company				
	13501 SW 128TH STREET SUITE 217					
		Address				
	MIAMI, FL 33186					
		City/ State and Zip Cod	e			
DA	KOTATAX@GMAIL.COM					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	on concerning this matter, pleas	se call:				
NELLY COUTO		at (³⁰⁵	5951252 de & Daytime Telephone Number			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment 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		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Y & C TRUCKING CORP

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	y filed with the Florida Dept. of State)	
P130000 7	13017	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida 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 "word "chartered," "professional association," or the abbreviation	Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	420 S PALOMINO STREET	
(Principal office address MUST BE A STREET ADDRESS)	CLEWISTON, FL 33440	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13501 SW 128TH STREET	
(A. A. A	SUITE 217	
	MIAMI, FL 33186	
D. If amending the registered agent and/or registered office add		
new registered agent and/or the new registered office address	-	
Name of New Registered Agent		
Name of New Registered Agent		
Name of New Registered Agent	eet address)	

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 sheet's, if nece'ssary)

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> <u>Jo</u>	ohn Doe		
X Remove	<u>V</u> <u>M</u>	Mike Jones		
X Add	<u>SV</u> <u>S</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	P	YAISEL PLASENCIA	12401 W OKECHOBEE ROAD	
Add			LOT #220	
X Remove			HIALEAH, FL 33018	
2) Change	P	JESUS MACHUAT PEREZ	420 S PALOMINO STREET	
Add			CLEWISTON, FL 33440	
Remove				
3)Change				
X Add				
Remove				
4) Change				
Add				
Remove			-	
5) Change				
Add				
Remove				
6) Change	-			
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	The second secon

AUGUST 17,2015 The date of each amendment(s) adoption:	, if other than the
date this document was signed.	Flued
AUGUST 17, 2015 Effective date if applicable:	SEERETARY OF SINA. DIVISION OF CORPERATION
(no more than 90 days after amendment file date)	15 AUG 20 PH 12: 58
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust 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"	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated	
Signature	
(By a director, president or other officer – if directors or officers have not	
selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	r court
Tesus Mach vat Pene 2 (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President.	
(Title of person signing)	· · · · · · · · · · · · · · · · · · ·