## P13000086336

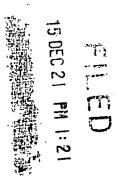
(Requestor's Name)	-		
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: GOD WILL TRUE	CKING, INC.	
DOCUMENT NUME	D12000086226		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Carmen R Lopez		
		Name of Contact Person	n
		Firm/ Company	
	5729 Wiley Street		
		Address	
	Hollywood, FL 33023		
•		City/ State and Zip Cod	e
gmfin	ancialsystemsllc@yahoo.con	1	
<del>-</del> -	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Carmen R. Lopez		954 at (	740-0205
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check 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		Ameno Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



GOD WILL TRUCKING, INC.

(Name o	of Corporation as currently	filed with the Florida Dept. of State)	
P13000086336			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the follo	wing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	" "company," or "incorporated" or tho". A professional corporation name m. A."	e abbreviation ust contain the
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )		
C. Enter new mailing address, if appli			
(Mailing address MAY BE A POST)	<u>OFFICE_BOX</u> )		
			<del></del>
D. If amending the registered agent an	id/or registered office addre	es in Florida, enter the name of the	
new registered agent and/or the nev		ss in Florida, enter the name of the	
Name of New Registered Agent	Carmen R. Lopez		
	5729 Wiley Street		
	(Florida stre	et address)	<del></del>
New Registered Office Address:	Hollywood	. Florida 3302	23
	(1)	City) (	Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations of the positi	on.
,,,,			
	Signature of New Re	gistered 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 <math>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.

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	Name	<u>Addres</u> s
1) Change	PS	Carmen R Lezma	5729 Wiley Street
Add		· ·	Hollywood, FL 33023
X Remove			
2) Change	PS	Carmen R Lopez	5729 Wiley Street
X Add			Hollywood, FL 33023
Remove			
3 ) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	· 		
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
· · · ·		
· · · · · · · · · · · · · · · · · · ·		
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
Q ,		

The date of each amendment(s) date this document was signed.	adoption:	, if other than th
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	opproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
12/15/20 Dated		
Signature	My HOTE	
select	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Carmen R Lopez	
	(Typed or printed name of person signing)	·
	President - Secretary	
	(Title of person signing)	