P14000005401

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Amend 10 2.24,14

COVER LETTER

TO: Amendment Section

Division of Corporations

: : :

NAME OF CORPORATION: E.F. TRUCKING CORP DOCUMENT NUMBER: P14000005401 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANGELA BELGICA CEDENO Name of Contact Person E.F. TRUCKING CORP Firm/ Company 740 NIMITZ BLVD Address LEHIGH ACRES, FL 33974 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 829-6527
Area Code & Daytime Telephone Number ANGELA BELGICA CEDENO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

E.F. TRUCKING CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P14000005401

nt(s) to

(Document Number of Corporation (if known)	_
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	ng amendmer
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	The newabbreviation contain the
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)	
New Registered Office Address: , Florida (City) , Florida (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:

(Attack 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 De	<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)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	VP		ERNESTO FERNANDEZ	740 NIMITZ BLVD
✓ Add				LEHIGH ACRES,FL 33974
Remove				
2) Change		_		
Add				
Remove				
3) Change			-	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Г 1		_		
Add				
Remove				

	i <mark>g or adding additi</mark> litional sheets, if ned	cessary).	(Be specific)			
							
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f an amer	dment provides fo	r an excha	nge, reclass	ification, or o	cancellation of	issued shares	
provision	dment provides fo s for implementing	the amen	dment if no	t contained in	the amendme	ent itself:	-
(if no	t applicable, indica	te N/A)					
							
						· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: 01/18/2014	_, if other than the
date this document was signed.	
Effective date if applicable: 01/18/2014	
(no more than 90 days after amendment file date)	-
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 2/13/14	
Signature angle B. Odens	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
ANOELA DEL CICA CEDENO	
ANGELA BELGICA CEDENO	
(Typed or printed name of person signing)	
PRESIDENT	_
(Title of person signing)	