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ALLAHASSEE, FLORIG

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C. LEWIS

MAY 7 2014

EXAMINER

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION	DRITUCO	Supplies	Transportation and Services, I	'nc
DOCUMENT NUMBER:	P 1400		•	
The enclosed Articles of Amend	iment and fee are su	bmitted for filing.		
Please return all correspondence	concerning this man	tter to the following:		
	Jvan	Vi cente	Urdaneta erson aneta, P.A. y RD # 502	
	Tuan Vic	ente Urd	aneta, P.A.	
	1655 S. L	Firm/ Compan E <b>JEUNE</b> 1	RD # 502	
<del></del>	CORAL 6	Address GABLES FL	33134	
		City/ State and Zip	and the second s	
E-m	TVUT (ail address: (to be us	aol. com	eport notification)	
For further information concern	ing this matter, pleas	e call:		
Juan Vice	nte Urda	neta at 30	5 728 1319	
Name of Contact	Person	Are	a Code & Daytime Telephone Number	
Enclosed is a check for the follo	wing amount made I	payable to the Florida	Department of State:	
	3.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Add	ress	<u>St</u>	reet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

APPKUVEL AND FILED

## Articles of Amendment to Articles of Incorporation

14 APR 28 PH 1:53

Moiture Expelier trai	secretary of State Services Inc Thorner with the Florida Dept. of State)
(Name of Corporation as currently filed	vith the Florida Dept. of State)
P 140000	
(Document Number of Con	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpo	ration:
J&L Supplies, Inc	The new
name must be distinguishable and contain the word "c	orporation," "company," or "incorporated" or the abbreviation inc," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	N/A
New Registered Office Address:	Florida street address)  NA , Florida
	(Čity) (Zip Code)
New Registered Agent's Signature, if changing Register	
l hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
Signature of New Re	egistered 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.

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)	<u>Title</u>	Name	Address
1) Change		<i>N/A</i>	
Add Remove			,
2) Change			
Add Remove			
3) Change	<del></del>	<u> </u>	
Add			
4) Change			
Add Remove			
5) Change			
Add Remove			<del></del>
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
N//L	
	-
	·
•	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
——————————————————————————————————————	
<del> </del>	



	4/24/14	14 APR 28 PM 1:53	if other than the
The date of each amendment(s) adoption:date this document was signed.	- 121/1	SECRETARY OF STATE TALL AHASSEF, FLORIDA	, is other man the
Effective date if applicable:	o more than 90 days after ame	endment file date)	
Adoption of Amendment(s) (CHECI	K ONE)		
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for approximately the shareholders was sufficient for approximately sufficie		s cast for the amendment(s)	
The amendment(s) was/were approved by the sha must be separately provided for each voting grou			
"The number of votes cast for the amendme		pproval	
by	group)	••	
The amendment(s) was/were adopted by the boar action was not required.	rd of directors without shareho	lder action and shareholder	
The amendment(s) was/were adopted by the inco- action was not required.	rporators without shareholder	action and shareholder	
Dated 4 24 1	Ч		
	t or other officer – if directors rator – if in the hands of a rece that fiduciary)		
Luis	Amadeo Co	menares erson signing)	
F	RESIDENT		
	(Title of person sign	nng)	