P14000021089

(Re	equestor's Name)	
(Ac	dress)	
	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bı	usiness Entity Na	me)
(Do	ocument Number))
Certified Copies	_ Certificate:	s of Status
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12/23/14--01007--015 **35.00



12 /29/14

COVER LETTER

TO: Amendment Section Division of Corpo				
NAME OF CORPOR	ATION: Division	Trucking Inc		
	ER: P14000021			
The enclosed Articles of	f Amendment and fee are su	abmitted for filing.		
Please return all corresp	oondence concerning this ma	tter to the following:		
•	Gemma Duarte	е		
-		Name of Contact Perso	D .	
_	Intx Carrier Se	rvices, Inc		
	1719 W Sligh <i>i</i>	Firm/ Company		
-	Trio vv engiri	Address		
• -	Tampa, FI 336			
_		City/ State and Zip Cod	e	
gen	naduarteics@g	gmail.com		
<u></u>	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Gemma Dua	arte	_{at (} 813	805-8572	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department 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		Amend	Address ment Section	
P.O. Box 6327		Division of Corporations Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation

FILED.
2014 DEC 23 PM 4: 14
2014 DEL 23 TALLAHASSEE, FLORIDA
TALLAHASSEE

Division Trucking Inc

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

P1400021089

1 to 3 .

nt(s) to

14000021003			21/15	_ ,
(Document Number of	Corporation (if know	vn)	ያ ሃ ጋጉ .	
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	a Statutes, this <i>Florid</i>	la Profit Corporation	adopts the followi	ng ame
If amending name, enter the new name of the co	erporation;			
me must be distinguishable and contain the word Corp.," "Inc.," or Co.," or the designation "Corp., ord "chartered," "professional association," or the	" "Inc," or "Co".	A professional corp	rporated" or the cooration name must	The abbrev conta
	6	408 Axelro	d Rd	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		Tampa, FL 33634		-
				_
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6408 Axelrod Rd		
		Tampa, FL 33634		-
. If amending the registered agent and/or register		Florida, enter the n	ame of the	_
new registered agent and/or the new registered of	ottice address: vila Zamora			
Name of New Registered Ageill	Axelrod Ro		_	
- 1007	(Florida street ada			
New Registered Office Address: Tampa	а	Florid	da 33634 (Zip Code)	
	(City)	, 1 70110	(Zip Code)	_
ew Registered Agent's Signature, if changing Reginereby accept the appointment as registered agent.	istered Agent:	nd accent the obligation	ons of the position	
			one of the position.	
Signature of Nev	w 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)

ì

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Dania Abrahantes	4411 W Hanna Ave
Add			Tampa, FL 33614
Remove			
2) Change	P	Jorge Avila Zamora	6408 Axelrod Rd
Add			Tampa, FL 33634
Remove			
3) Change			
Add			
Remove			
4) Change			-
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)				
		<u> </u>		_	
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f an amendment provides for an excl	nange, reclassifi	cation, or ca	ncellation of	issued sha	res,
provisions for implementing the ame	nange, reclassifi	cation, or car	ncellation of the amendme	issued sha nt itself:	res.
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassifi endment if not c	cation, or car ontained in th	ncellation of the amendme	issued sha nt itself:	res.
provisions for implementing the ame	nange, reclassifi endment if not c	cation, or car ontained in t	ncellation of the amendme	issued sha nt itself:	res.
provisions for implementing the ame	nange, reclassifi indment if not c	cation, or can	ncellation of the amendme	issued sha nt itself:	<u>res.</u>
provisions for implementing the ame	nange, reclassifi endment if not c	cation, or car ontained in t	ncellation of the amendme	issued sha nt itself:	res,
provisions for implementing the ame	nange, reclassifi endment if not c	cation, or car ontained in t	ncellation of he amendme	issued sha nt itself:	res.
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassifi indment if not c	cation, or can	ncellation of he amendme	issued sha nt itself:	res,
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provisions for implementing the ame	nange, reclassifi indment if not c	cation, or car	ncellation of the amendme	issued sha nt itself:	res.

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after umendment 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 12/12/2014	
Signature De	
(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)	
Dania Abrahantes	
(Typed or printed name of person signing)	
President	
(Title of person signing)	·······