P14000021506

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: EBEN-EZER T	RUCKING CO OF PO	DLK COUNTY FL INC			
DOCUMENT NUMBER: P14000021506						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
	PAMELA A GREE					
		Name of Contact Person				
	EXPRESS 1040 I	NC				
		Firm/ Company				
	319 3RD ST NW					
		Address				
	WINTER HAVEN	FL 33881				
		City/ State and Zip Code	;			
FX	PRESS1040INC@					
		ed for future annual report	notification)			
	(*- ·	,			
For further information concerning this matter, please call:						
PAMELA A (GREEN	at (863	, 293-1413			
Name	of Contact Person		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 P.O. Box 6327		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle			
1 di	lahassee, FL 32314	Tallahassee, FL 32301				

Articles of Amendment Articles of Incorporation

EBEN-EZER TRUCKING CO OF POLK COUNTY FL INC

(Name of Corporation as currently filed with the Flor	ida Dept. of State)
P14000021506	
(Document Number of Corporation (if ke	10Wn)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: EBEN-EZER ENTERPRISE INC	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.2"	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent (Florida street	
New Registered Office Address:	. Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h 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:

(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 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 Jo	<u>nes</u>			
X Add	<u>sv</u>	Sally Sm	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		Name	Address		
1) Change		- <u>-</u>				
Add						
Remove						
2) Change		_				
Add						
Remove						
3) Change		-				
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change						
Add						
Remove						

	(Be specific)
·	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment	t(s) adoption: 03/24/2014	, if other than the
date this document was signed	i.	
Effective date if applicable:	03/24/2014	_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated_03/2	24/2014	
Signature S	Marin II Hand	
	By addirector, president or other officer - if directors or officers have not been	
	elected, by an incorporator — of in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	MAXON GEFFRARD	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	