P14000023063

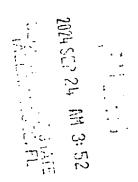
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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Santi Truck Trailer Repair Corp. DOCUMENT NUMBER: P14000023063
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Altamirano, Santiago Name of Contact Person Santi Trucks Trailer Repair Corp Firm/ Company 1457 NE 152nd Street Address North Miani Beach, FL 33162 City/ State and Zip Code Santitruck & Seach & Omail: Com
E-mail address: (to be used for future annual seport notification)
For further information concerning this matter, please call:
Altamirano Santiago at (786) 326-4411 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to

Articles of Incorporation

Articles of Inco	orporation
of	
Santi Trucks Trailer	Repair Corp.
(Name of Corporation as currently	filed with the Florida Dept. of State
Santi Trucks Trailer (Name of Corporation as currently P140000 23063	25. 25. 25. 25. 25. 25. 25. 25. 25. 25.
(Document Number of	Corporation (if known) ALLY STATE
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Th
name must be distinguishable and contain the word "corporation." "co"." or Co" or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	17707 NW Miani Court
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33169
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(mailing dualess <u>MAT DE AT OST OFFICE DOS</u>)	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
,	(Σ φ θουν)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing
····Summe of the tree	o

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	$\overline{\mathrm{bL}}$	John Doe	
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			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	_		
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Remove			
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F. If an amendment pr provisions for imple	ovides for an exchar	<u>ige, reclassificatio</u> Iment if not conta	on, or cancellation ined in the amen	n of issued share: dment itself:	<u>s,</u>
(if not applicabl	le, indicate N/A)	incircii in inoi conta	med in the annen	44.011	
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ne date of each amendment(s) adoption:	, if other than t
e this document was signed.	
ective date <u>if applicable</u> :	0 2024
. (no more tha	in 90 days after amendment file date)
te: If the date inserted in this block does not meet the apcument's effective date on the Department of State's record	oplicable statutory filing requirements, this date will not be listed as t is.
option of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, action was not required.	or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders, by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	
"The number of votes east for the amendment(s) was	/were sufficient for approval
by	N .
(voting group)	
Dated 9/20/2024	
Signature antiogs	
	officer – if directors or officers have not been
appointed fiduciary by that fiduci	n the hands of a receiver, trustee, or other court
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