# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140001633073)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

JUL 16 2014

R. WHITE

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : I20140000047

Phone : (813)774-4726

Fax Number

: (813)774-4726

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN TRUSTWORTHY TRUCKING INC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

#### **COVER LETTER**

TO: Amendment Section

Division of Corporations						
NAME OF CORPOR	ATION: TRUSTWO	RTHY TRUCKI	NG INC			
	BER: P1400002543		·			
The enclosed Articles of Amendment and fee are submitted for filing.						
THE CHOIOSCU APACTES	of Americanean and 100 are su	omitted for fining.				
Please return all correspondence concerning this matter to the following:						
	ROBERTO SANTOS					
		Name of Contact Person				
	4329 SUMMIT CREEK BLVD APT 2301					
		Firm/ Company				
		Address				
	ORLANDO FL 32					
	<u> </u>	City/ State and Zip Code	ç			
<b>+</b> v. 10	stworthy0411@gn	nail com				
<u> </u>		sed for future annual report	notification)			
	,		,			
For further information	n concerning this matter, pleas	se call:				
MYRIAM VA	MYRIAM VARGAS  Name of Contact Person  at (813) 774-4726  Area Code & Daytime Telephone Number					
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fcc	☐\$43,75 Filling Fcc & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52,50 Filing Fcc Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divi P.O.	ling Address Endinent Section sion of Corporations Box 6327 thussee, FL 32314	Amend Divisio Clifton 2661 E	Address Innent Section on of Corporations Building Executive Center Circle assee, FL 32301			

Articles of Amendment		1-1	است س. دد.		
to			.,		
Articles of Incorporation	.,	1		1.1	
af	14	سوفر آن		• •	

### TRUSTWORTHY TRUCKING INC

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

## P14000025438

(Document Number of Corporation (if known)

endinent(s) to

ome must be distinguishable and con Curp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	nation "Corp." "Inc," or	r "Co". A professional co	eorporated" or the a reporation name must
Enter new principal office address.	if applicable:	ROBERTO :	SANTOS
incipal office address <u>MUST BE A S</u>		4329 Summit C	reek Blvd # 2301
		Orlando FL	32837
		Orlando FL	32837
	w registered office addr	ess:	e name of the
	ROBERTO SA	ANTOS	
new registered agent and/or the ne	ROBERTO SA 4329 Summit	<sup>1531</sup> ANTOS Creek Blvd # 23	
	ROBERTO SA 4329 Summit	ess: ANTOS Creek Blvd # 23 street address)	

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 Function 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: XChange	PT	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	ELTHON FONSECA	4733 WEST WATERS AV
Add	_		TAMPA FL 33614
Remove			
2) Change	Р	ROBERTO SANTOS	4329 Summit Creek Bivd #
<b>✓</b> Add			Orlando FL 32837
Remove			
3) Change			
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
***	

The date of each amendment	(s) adoption: 07/08/14	, if other than the
date this document was signed		
Effective date if applicable:	07/08/14	
	(no more than 90 clays after amendment file date)	<del>_</del>
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere 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 votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
· — ·	(voiing 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.	re adopted by the incorporators without shareholder action and shareholder	
Dated 7/8/	14	
Signature _	Contract of the second of the	
(E	By a director, president or other officer — if directors or officers have not been elected, by an incorporator — if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	_
	ELTHON FONSECA	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	<del>_</del>