# P14000026213

Office Use Only



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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ERICK	MANUEL TRUCKING INC
DOCUMENT NUMBER: P1400002	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Manuel Cresp	00
ERICK MANU	Name of Contact Person  JEL TRUCKING INC
<del></del>	Firm/ Company
1350 W 6 AV	APT#125
	Address
HIALEAH, FL	33010
	City/ State and Zip Code
mlcrespo83@gma	ail.com
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter.	please call:
Manuel Crespo	at (786 ) 398-2716
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount t	nade payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	<del>_</del>
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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#### Articles of Amendment to Articles of Incorporation of

### ERICK MANUEL TRUCKING INC (Name of Corporation as currently filed with the Florida Dept. of State) P14000026213 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent (Florida street address) N/A 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 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 Do	o <u>e</u>	
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VP		Liana Morales	1350 W 6 AV
Add		_		HIALEAH, FL 33010
Remove				
2) Change				
Add Add		-		
Remove				
3) Change				
		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	<del></del>	<del></del>		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
	N/A
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
If an amendment provides for an excl 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	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:  N/A
provisions for implementing the ame	endment if not contained in the amendment itself:
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provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	2/05/0044	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	ere 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_3/25	5/2014	
Signature_	mouspo	
S	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)	Prince.
	Manuel Crespo	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	