## P140000 83144

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GEORGIARY OF STATE

JUL 25 2016 C LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: RED ROBBON T	RUCKIG FORCE, INC.				
DOCUMENT NUMB						
	f Amendment and fee are s	ubmitted for filing.				
Please return all corresp	oondence concerning this ma	atter to the following:				
_ 1	BASSAM ALSALEH					
_	·············	Name of Contact Perso	n			
ACCOUNTING AND MORE OF TAMPA						
Firm/ Company						
4	815 E. BUSCH BLVD. ST	• •				
Address						
1	TAMPA, FL. 33617					
_	<u> </u>	City/ State and Zip Cod	e			
BASSA	AMJ2007@YAHOO.COM					
	E-mail address: (to be u	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
BASSAM ALSALEH		at (	760-7658			
Name of	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for t	the following amount made	payable to the Florida Depa	artment 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)			
Ameno Divisio P.O. B	ng Address  dment Section on of Corporations lox 6327	Amend Divisio Clifton	Address Iment Section on of Corporations Building			

Tallahassee, FL 32301



July 5, 2016

BASSAM ALSALEH / ACCOUNTING AND MORE OF TAMPA 4815 E. BUSCH BLVD. SUITE 213 TAMPA, FL 33617 US

SUBJECT: RED RIBBON TRUCKING FORCE, INC.

Ref. Number: P14000083144

We have received your document for RED RIBBON TRUCKING FORCE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

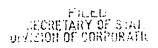
Letter Number: 716A00014039

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

Division of Comparations DO POV 6997 Tallahassas Florida 99914

## Articles of Amendment to Articles of Incorporation of



RED ROBBON TRUCKIG FORCE, INC.

2016 JUL 15 AM 8: 09

(Name of Corporation as currently filed with the Florida Dept. of State)  P14000083144  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the folits Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	The new
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Principal office address MUST BE A STREET ADDRESS )  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 in Florida, enter the name of the	
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(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	
Name of New Registered Agent  MAHER SAMOUR	
14230 N. FLORIDA AVE STE C	
(Florida street address)	<del></del>
TAMPA 336	13
New Registered Office Address: , Florida (City)	(Zip Code)

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 Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PRES	MAHER SAMOUR	14230 N. FLORIDA AVE.
X Add			TAMPA, FL. 33613
Remove			
2) Change	VP	HADEEL SAID	14230 N. FLORIDA AVE.
Add			TAMPA, FL. 33613
X Remove			
3 ) Change	P	TAREK SAID	14230 N. FLORIDA AVE.
Add			TAMPA, FL. 33613
X Remove			
() Class			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		·	
6) Change	-	-	
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
	· · · · · · · · · · · · · · · · · · ·		
<del></del>			
<u></u>			
			-
f an amendment provides for an excha	ange, reclassification, or c	ancellation of issued shares,	
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not contained in	the amendment itself:	
(y nor approvate, material mil)			
	· · · · · · · · · · · · · · · · · · ·		
	<del></del>		

The date of each amendment(s)	adoption:						, if o	ther	than the
date this document was signed.	. •				5E.0	RET/	NRY Eco	.L/ OF 5	IAG Million
Effective date <u>if applicable</u> :						<i>/</i> (		*G**U/#	i ≱i { ! { ! ñs
	(1	no more than 90 da	ys after amendment file	date)	2016 J	UL	15	AM	<b>8</b> : 09
Note: If the date inserted in this document's effective date on the I			statutory filing require	ements, this	date w	ill no	ot be	liste	d as the
Adoption of Amendment(s)	( <u>CHEC</u>	CK ONE)							
The amendment(s) was/were as by the shareholders was/were	dopted by the sha sufficient for appr	reholders. The nun	nber of votes cast for th	e amendmen	t(s)				
☐ The amendment(s) was/were approvided for must be separately provided for					nent				
"The number of votes cas	st for the amendm	nent(s) was/were suf	ficient for approval						
by									
	(voting	group)							
☐ The amendment(s) was/were ac action was not required. ☐ The amendment(s) was/were accepted was not required.					der				
action was not required.									
06/24/201 Dated	6	_							
Signature									
(By a select		rator – if in the han	if directors or officers had of a receiver, trustee			_			
	TAREK SAID								
	(Тур	ped or printed name	of person signing)			•	<u> </u>	_	
	P.		1						
		(Title of per	rson signing)		<del></del>				