PIUCOSION

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	ısiness Entity Nan	ne)	
(Do	ocument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
Gran,	abo	义	

Office Use Only



000279122030

11/18/15--01020--012 **35.00

HOV 25 2015

. VVITILE

15 NOV 18 AH 5: 16

COVER LETTER

ţ

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	rion: Kalhoo	one Trucking	INC			
NAME OF CORPORATION: Kalhooone Trucking INC DOCUMENT NUMBER: P1400090287						
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspon	ndence concerning this mat	tter to the following:				
	Shantal	Knight Name of Contact Person	n			
Kalhoopne Trucking INC Firm/Company						
	3613 Sw 69	Terracy Address				
	miramar FL, 33023 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Shantal Name of C	Knight Contact Person	at (9 S 4 Area Co				
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)			
Amendi Division P.O. Bo	nent Section n of Corporations ox 6327 ssee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301			

FILED

15 NOV 18 AH 5: 16

Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE TALLAHASSEE FLORIDA

Kalhooone Trucki	ing INC
(Name of Corporation as cu	urrently filed with the Florida Dept. of State)
P140000907	287
(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
NIA	The new
	poration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent NIA	
(Flo	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	
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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	<u>V</u>	_	Valvin S Knight (jr)	3613 SW 69 terraco Miramar FL,
X Add			·	Miramar FL,
Remove			-	33023
2) Change				
Add				
Remove				
3) Change				
Add				
Remove			·	
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	·····			
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
NIA	
and the same and an	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
WIA	
10 (15	

	•	;	
		;	
The date of each amendment(s) ado date this document was signed.	ption:		if other than the
Effective date if applicable:			
	(no more than 90 days	after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department		atutory filing requirements, this o	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adop by the shareholders was/were suff		er of votes east for the amendmen	t(s)
The amendment(s) was/were appro- must be separately provided for ea	oved by the shareholders through vo ach voting group entitled to vote se		nent
"The number of votes cast fo	or the amendment(s) was/were suffic	ient for approval	
by	(voting group)	.,,,,	
	(voning group)		
The amendment(s) was/were adopt action was not required.	ted by the board of directors withou	t shareholder action and sharehol	der
The amendment(s) was/were adop action was not required.	ted by the incorporators without sha	reholder action and shareholder	
Dated///	24/15		
Signature	24/15 Shings		
(By a din selected,	ector, president or other officer — if by an incorporator — if in the hands d fiduciary by that fiduciary)		
_	Shantal Ihn		
	(Typed or printed name of	(person signing)	
	Presion	lent -	
	(Title of perso	on signing)	