3052863515

₫0001/0006 Page 1 of 1

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.

(((H16000291258 3)))



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

From:

Account Name : MIGUEL TURBAY Account Number : I20160000083

Phone

: (305)267-0565

Fax Number

: (305)266-3515

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

Email	Address:				

COR AMND/RESTATE/CORRECT OR O/D RESIGN L.A TRUCKING SERVICES, CORP.

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

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 29 2016

C LEWIS

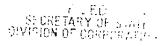
TO: Amendment Section

COVER LETTER

Division of Corpor	rations		
NAME OF CORPOR	ATION: LA TRUCKING	SERVICES, CORP	
DOCUMENT NUMB	ER: P14000091687		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
1	MIKE TURBAY		
_		Name of Contact Person	1
1	MIKE TURBAY		,
_		Firm/ Company	
2138 SW 67 AVE			
Address			
1	MIAMI FL 33155		
_	<u> </u>	City/ State and Zip Code	e
MAIK	OINS@GMAIL.COM		
	_	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MIKE TURBAY		at (305	de & Daytime Telephone Number
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment 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)
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	

_ MAIKO INSURANCE

₫0003/0006



Articles of Amendment to Articles of Incorporation of

2016 NOV 28 AM 8: 46

L.A TRUCKING SERVICES, CORP	
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P14000091687	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
L. If amending name, enter the new name of the cor	rporation:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	I "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
3. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADD)</u>	RESS)
•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	ro
(Manual and Cos MATA BEAT COST OF THE BOX	
· N. Yearnandinandha	d office address in The did a second control of the
 If amending the registered agent and/or registered new registered agent and/or the new registered of 	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
•	• (City) (Zip Code)
New Registered Agent's Signature, if changing Registered agent. I	stered Agent: I am familiar with and accept the obligations of the position.
Joseph mie opponimmen we region we agent. 1	
	·
Signa	sture of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title 2nd 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:

<u>x</u> c	hange	PT	John Doe	
<u>x</u> r	emove	<u>v</u>	Mike Jones	
<u>x</u> A	Add	<u>\$V</u>	Sally Smith	•
Type (Chec	of Action ck One)	Title	Name	<u>Addres</u> s
	Change	VP	LAURA LIMA	1931 NW 2 ST
×	Add			MIAMI FL 33125
_	Remove	•		
2) _	Change		_	
_	Add			
_	Remove			
3)_	Change			
_	Add			
	Remove			· · · · · · · · · · · · · · · · · · ·
4) _	Change		<u></u>	
_	Add			
_	Remove		ŕ	· · · · · · · · · · · · · · · · · · ·
5) _	Change		_	
_	Add			
_	Remove			
6	Change			
o) _		-		
_	Add Remove	•		

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
to .	
•	
•	
v	
	
If an amendment provides for an exch 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	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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 (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 (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 (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 (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

SECRETARY OF STATE
OIVISION OF CORPURATE OF

	11/23/2016	
The date of each amendment(s) adoption date this document was signed.	" ZUTE NOV 28 AH 8: 46	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block dedocument's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date will ent of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by	***	
	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder	
11/23/2016 Dated		
Signature $\mathcal U$		
(By a director, selected, by a	, president or other officer — if directors or officers have not been n incorporator — if in the hands of a receiver, trustee, or other court uciary by that fiduciary)	-
ARTU	JRO DEL ARCO	
	(Typed or printed name of person signing)	
,,- · PRES	SIDENT	
	(Title of person signing)	····