

Division of Corporations

Page 1 of 1

P15000002408

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.

(((H15000181866 3)))



H150001818663ABC3

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 : LAXMY'S CARRIER SERVICES
Account Number : I20040000007
Phone : (305) 640-0281
Fax Number : (305) 640-0282

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

Email Address: LAXMYC2001@yahoo.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
MICHAEL & SON TRUCKING INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUL 28 AM 11:24

Electronic Filing Menu

Corporate Filing Menu

Help

JUL 29 2015

T CANNON

07/27/2015 23:10 FAX 3056400282

LAXMY'S*CARRIER

001/007

850-617-6381

7/28/2015 10:50:11 AM PAGE

1/001

Fax Server



July 28, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MICHAEL & SON TRUCKING INC
*FAX FILING**LAXMY'S CARRIER SERVICES*
SUITE C
BIALEAH, FL 33015US

SUBJECT: MICHAEL & SON TRUCKING INC
REF: P15000002408

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

The background of page 4 is too dark and cannot be read.

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.

Tina D Cannon
Regulatory Specialist II

FAX Aud. #: H15000181866
Letter Number: 915A00015771

RECEIVED

15 JUL 28 PM 12:27

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MICHAEL & SON TRUCKING INC

DOCUMENT NUMBER: PI5000002408

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

YUSLANIA TUDELA

Name of Contact Person

MICHAEL & SON TRUCKING INC

Firm/ Company

17944 NW 67TH AVE STE C

Address

HALEAH, FL, 33015

City/ State and Zip Code

LAXMYSCARRIER1@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAXMY CHACON

at (305)

640-0281

Name of Contact Person

Area Code & Daytime Telephone Number

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)

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

15 JUL 26 AM 11:24

Articles of Amendment
to
Articles of Incorporation
of

MICHAEL & SON TRUCKING INC

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

P15000002408

(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:

The new 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."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

9607 SW 18TH TERRACE

MIAMI, FL, 33165

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

9607 SW 18TH TERRACE

MIAMI, FL, 33165

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:Name of New Registered Agent GISELA GARCIA

9607 SW 18TH TERRACE

(Florida street address)

New Registered Office Address: MIAMI, Florida 33165

(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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	P	YUSLANIA TUDELA	17944 NW 67TH AVE STE C
<input type="checkbox"/> Add			HIALEAH, FL, 33015
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	P	GISELA GARCIA	9607 SW 18TH TERRACE
<input checked="" type="checkbox"/> Add			MIAMI, FL, 33165
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUL 28 AM 11:24

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

15 JUL 28 AM 11:24

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 07/27/15 if other than the date this document was signed.

Effective date if applicable: 07/27/15
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each 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 the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 7/27/15

Signature _____

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

YUSLANIA TUDELA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUL 28 AM 11:24