## 7150000 13004

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## **COVER LETTER**

Division of Corporations Rojas - Son Truck Inc. NAME OF CORPORATION: \_\_ DOCUMENT NUMBER: Y1500013004 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Corrun Surves 33604. City/ State and Zip Code address: (to be used for future annual report notification) For further information concerning this matter, please call: R13 805-8572.

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 & □\$43.75 Filing Fee & □\$52 50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

**Mailing Address** 

TO: Amendment Section

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

## Articles of Amendment

•	to
	Articles of Incorporation
_	υf
Rojas: Son	Truck Inc.
(Nan	me of Corporation as currently filed with the
P1500001300	.4.
	(Document Number of Corporation (if

enț(s) to

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P15000013DO4.	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Omer Rojas 7916 Kosi Palm Pl Unit 201.
•	Tampa, FL 3365
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 new registered agent and/or the new registered office address	16.
Name of New Registered Agent Omm RIX	വ്
Name of New Registered Agent Omm Registered Agent 7916 Hose Forida s.	Palm Pl Witt 201.
New Registered Office Address: Tampa.	Florida 3365 ·
	(Exp. 15dd)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
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 Doc	
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>	<u>Addres</u> s
1) Change	P	Maikel Rojas Cruz	. 7916 Kosi Palm Pl Unit 20
Add Remove			Jampa, FC 33415.
2) V Change	P	Omar Rojas	7916 Xosi Palum PIllnit 201
Add			Tarripa, FL 33615.
Remove 3) Change			<del></del>
Add			
4) Change			
Add			
5) Change			
Add			
6) Change			<del></del>
Add			1
Remove		•	

Attach additional sheets, if necessary).		
		NIA
•		
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	·	
an amendment provides for an excl	ange, reclassification, or	r cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	in the amendment itself:
	NA	
	J1H1	<del></del>
	· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) add date this document was signed.	ption:	, if other than the
date tins, document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
<b>Note:</b> If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statementach voting group entitled to vote separately on the amendment(s):	r
"The number of votes east fo	r the amendment(s) was/were sufficient for approval	
by	, ,	
	(voting group)	
action was not required.   ☐ The amendment(s) was/were adop	ted by the board of directors without shareholder action and shareholder ted by the incorporators without shareholder action and shareholder	
action was not required.  Dated  Signature	4/15/-	
selected,	by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)	
_	Omer Royas (Typed or printed name of person signing) PYLS JOURT	
	(Typed or printdl name of person signing)	
_	Prisidunt.	<del></del>
	(Title of person signing)	