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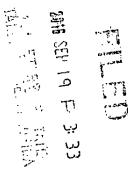
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Calero truck corp DOCUMENT NUMBER: PISO00034621
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Heidy Roderguez Name of Contact Person Chian Calcier Services Contact Person Firm/ Company 5050 New 74 Lue Ste 108 Address Hawi fl 33166 City/ State and Zip Code City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
leiny Roderanez = 305, 392, 1035
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 Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation

of
Calero truck CORP
(Name of Corporation as currently filed with the Florida Dept. of State)
P15000034621
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Tack Sonville, Fl. 32239 Tack Sonville, Fl. 32239
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
2884 Taylor Hill Dr.
New Registered Office Address: Jacksonville, Florida 32239
(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.
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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:	,	y	
X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	1	Jose M Apolinario	2884 Taylor Hill De Jacksonville, Fl
Add		•	Jacksonville, fl 3 2239
Remove;			200
(1) Change		" Niurka Caleno	2884 Taylor Hill Da
To Programma Final Final Medical States			Jacksonville +132239
Remove		ali a seriegali ili. Tanggaran seriegalah seriegalah seriegalah	
3) Change	: .	<u> </u>	
Add	,`	. 1.	
Remove		part to	
4) Change	s.,*		
Add		No.	2 1000
; Remove			
5)Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)

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If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
<u> </u>	
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The date of each amountment (a) adopted		2/14/2016	, if other than the
The date of each amendment(s) adopt date this document was signed.		1111	, it outer than the
Effective date if applicable:		9/14/201	()
	(no more than	90 days after amendment file	e date)
Note: If the date inserted in this block document's effective date on the Depart		licable statutory filing requir	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were adopted by the shareholders was/were suffici	d by the shareholders. The ent for approval.	he number of votes cast for th	ne amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each			
"The number of votes cast for t	the amendment(s) was/w	ere sufficient for approval	
by	(voting group)		
	(voting group)		
The amendment(s) was/were adopted action was not required.	d by the board of directo	rs without shareholder action	and shareholder
The amendment(s) was/were adopted action was not required. Dated	by the incorporators with the last of the	ithout shareholder action and	
Signature	1		distribution of the second
(By a direct	y an incorporator – it in i	the hands of a receiver, truste	have not been se, or other court
		1 Apolinari	0
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