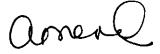
## P15000060164

4.	(Requestor's Name)			
	(Address)			
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	(City/State/Zip/Phone #)			
PICK-U	P WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

ION: REAL TRUCKING	S SERVICE CORP			
P15000060164				
mendment and fee are sul	bmitted for filing.			
dence concerning this mat	ter to the following:			
ELICE GARZARO				
	Name of Contact Person	1		
ANCIS E. HOLDEN JR. F	P.A			
	Firm/ Company			
166 HIALEAH DRIVE				
Address				
ALEAH FL 33010				
	City/ State and Zip Code			
RZARO@HOTMAIL.CO	М			
•		notification)		
(	•	•		
ncerning this matter, pleas	se call:			
	305	885-1475		
YBE GARZARO  Name of Contact Person		de & Daytime Telephone Number		
		,		
e following amount made	payable to the Florida Depa	irtment of State:		
□\$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		Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		
	P15000060164  Imendment and fee are subsequence concerning this mater.  ELICE GARZARO  ANCIS E. HOLDEN JR. F. HALEAH DRIVE  ALEAH FL 33010  RZARO@HOTMAIL.COME-mail address: (to be use some contact Person to following amount made to the contact Person to the contact Pers	Imendment and fee are submitted for filing.  Idence concerning this matter to the following:  ELICE GARZARO  Name of Contact Person  ANCIS E. HOLDEN JR. P.A  Firm/ Company  HIALEAH DRIVE  Address  ALEAH FL 33010  City/ State and Zip Code  RZARO@HOTMAIL.COM  E-mail address: (to be used for future annual report  Incerning this matter, please call:  at (  305  Area Co  e following amount made payable to the Florida Depa  Certificate of Status  Certified Copy (Additional copy is enclosed)  Address  ment Section  a of Corporations  ox 6327  Street  Amend  Division  City/ State and Zip Code  Amend  Contact Person  A Corporations  Ox 6327  Clifton  Division  Code Corporations  Code Code Code Code Code Code Code Code		

## Articles of Amendment to Articles of Incorporation

FILED

REAL TRUCKING SERVICE. CORP 2015 HOV -5 PH 31 48 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY DE STATE P15000060164 (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: N/A 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." 9447 FONTAINEBLEAU BLV # 204 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) MIAMI, FL 33172 C. Enter new mailing address, if applicable: 9447 FONTAINEBLEAU BLVD #204 (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33172 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: **ETTORE PIACQUADIO** Name of New Registered Agent 9447 FONTAINEBLEAU BLV # 204 (Florida street address) MIAMI New Registered Office Address: (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: X Change	PT Jo	hn Doc	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	Address
I) Change	P	LUIS DIAZ	12240 SW 187TH TERR
Add		_	MIAMI FL 33177
X Remove			
2) Change	P	ETTORE PIACQUADIO	9447 FONTAINEBLEAU BLV
X Add		-	# 204
Remove			MIAMI FL 33172
3) Change	VP	CESAR L. DIAS	9447 FONTAINEBLEAU BLV
X Add			#204
Remove			MIAMI, FL 33172
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

* a	11/2/2015	
The date of each amendment(s) a date this document was signed.	doption:	, if other than t
. 11/	2/2015	
Effective date <u>if applicable</u> :	(no more than 90 days	after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable s epartment of State's records.	statutory filing requirements, this date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The numb afficient for approval.	per of votes cast for the amendment(s)
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through vore seach voting group entitled to vote se	oting groups. The following statement eparately on the amendment(s):
	for the amendment(s) was/were suffi	
by	(voting group)	,,
	(voting group)	
		ut shareholder action and shareholder
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without sha	areholder action and shareholder
11/2/2015 Dated		
Signature	4	
select	lirector, president or other officer — if id, by an incorporator — if in the hand ited fiduciary by that fiduciary)	f directors or officers have not been s of a receiver, trustee, or other court
	LUIS DIAZ	
	(Typed or printed name of	of person signing)
	PRESIDENT	
	(Title of pers	con signing)