P15000012189

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SANCHO HAU	LING ING		
DOCUMENT NUMBER: P15000072189			
The enclosed Articles of Amendment and fee are	submitted for fil	ing.	
Please return all correspondence concerning this i	matter to the follo	owing:	
SHAMIN SANCHO			
	Name of C	ontact Person)
SANCHO HAULING INC	C		
	Firm/	Company	
11723 LAKE CLAIR CIR	CLE		
	Ad	idress	
CLERMONT, FL 34711			
	City/ State	and Zip Code	e
SSANCHO@MIDDLESEXCO.	СОМ		
E-mail address: (to be	used for future a	innual report	notification)
For further information concerning this matter, ple	ease call:		
SHAMIN SANCHO	at +	352) 235-0147 de & Daytime Telephone Number
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the	Florida Depa	rument of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fi Certified ((Additional enclosed)	Copy Leopy is	□\$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		Amendi Division Clifton	Address ment Section n of Corporations Building secutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SANCHO HAULING INC (Name of Corporation as currently filed with the Florida Dept. of State) P15000072189 (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: 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 <u>MUST BE A STREET ADDRESS</u>) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: 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 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	<u>PT</u>	John Do	<u>e</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	0		Richard L. Foster	11723 Lake Clair Circle
x Add				Clermont, FL 34711
Remove				
2) Change				
Add				
Remove				
3) Change	·	_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	 			
Add				
Remove				
6) Change		_		
Add				
Remove				

<mark>f amending or adding additional Arti</mark> Attach <i>additional sheets, if necessary).</i>	(Be specific)
.,.	(2.1 sp. 2.1)
ALL LAND TO THE PARTY OF THE PA	
'an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amor	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament if the contained in the internation resent
<u> </u>	

	November 24, 2015	
The date of each amendmen		, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	November 24, 2015	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/weby the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	ı
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Nove Dated	mber 24, 2015	
Signature	Manul Stult	
	By a director, president or other officer - if directors or officers have not been	
	elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
a	ppointed fiduciary by that fiduciary)	
	SHAMIN SANCHO	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	<u></u>

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