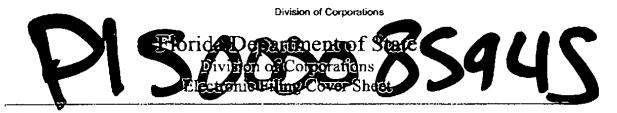
7/23/2019



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(((H19000220870 3)))



H190002208703ABC\$

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : I20140009047 Phone

: (813)774-4726

Fax Number : (813)877-2186

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

Email Address:\_

## COR AMND/RESTATE/CORRECT OR O/D RESIGN D FAMILY TRUCKING, INC

| Certificate of Status 0 |         |  |
|-------------------------|---------|--|
| Certified Copy          | 0       |  |
| Page Count              | 04      |  |
| Estimated Charge        | \$35.00 |  |

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7

TO: Amendment Section

COVER LETTER

| Division of Corp        | orations   |   |  |
|-------------------------|--|---|--|
| NAME OF CORPO           | RATION: D FAMILY TRUC  | CKING INC   |  |
| DOCUMENT NUMI           |  |   |  |
| The enclosed Articles   | of Amendment and fee are st  | ibmitted for filing.  |  |
| Please return all corre | spondence concerning this ma   | itter to the following:   |  |
|                         | PARRADO DASIEL   |   |  |
|                         |  | Name of Contact Perso   | n  |
|                         | D FAMILY TRUCKING IN   |   |  |
|                         |  | Firm/ Company   |  |
|                         | 4508 W HENRY AVE   |   |  |
|                         |  | Address   |  |
|                         | TAMPA; FL 33615  |   |  |
|                         |  | City/ State and Zip Cod   | Č  |
| dfami                   | lytrucking123@yahoo.com  |   |  |
|                         | · · · · · · · · · · · · · · · · · · ·  | sed-for future annual report                                      | notification)  |
| •                       | `  |   |  |
| For further information | n concerning this matter, pleas  | se call:  |  |
| PARRADO, DASIEL         |  | . :813<br>at (  | de & Daytime Telephone Number  |
| Name of Contact Person  |  | Area Co   | de & Daytime Telephone Number  |
| Enclosed is a check fo  | r the following amount made  | payable to the Florida Depa                                       | artment of State:  |
| XI \$35 Filing Fee      | □\$43.75 Filing Fee:&<br>Certificate of Status                               | ☐S43.75.Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)   |
| Ame<br>Divi<br>P.O.     | ting Address endment Section sion of Corporations Box 6327 ahassee, FL 32314 | Ameno<br>Divisio<br>Cliftor<br>2661 E                             | Address Iment Section on of Corporations Building executive Center Circle exsec.FL 32301 |

## Articles of Amendment to, Articles of Incorporation of

.;•

| D FAMILY TRUCKING INC  |  |   |
|--|--|---|
| (Name of Corporation as currently f  | iled with the Florida Dept. of State)  |   |
| P15000085945   |  |   |
| {Document Number of C  | orporation (if known)                  | ** **** , , , **** , ****                 |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Statutes, the Florida | orida Profit Corporation adopts the fo | llowing amendmeni(s)                      |
| A. If amending name, enter the new name of the corporation:  |  |   |
|  |  | 776                                       |
| name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co word "chartered." "professional association," or the abbreviation "P   | ". A professional corporation name     | The new the abbreviation must contain the |
| 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)  |  | 2019 JUL 25                               |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  | in Florida, enter the name of the      | 5 AM 9: 05                                |
| Name of New Registered Agent   |  | · ·                                       |
| (Florida street  | aidress)                               | <del></del>                               |
| New Registered Office Address:   | , Florida                              |   |
|  | (v)                                    | (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 pos  | ition.                                    |
| Signature of New Regi  | stered Agent, if changing              | <del></del>                               |

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;  $\hat{V} = \hat{V}$  ice President;  $\hat{T} = I$  reusurer; S = Secretary; D = Director;  $\hat{T}R = T$  rustee; C = Chairman or Clerk; CEO = Chief. Executive Officer; CEO = 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 us a Change, Mike Jones, V us Remove, and Sally Smith, SV as an Add.

| Example: X Change          | PI         | John Doe      |  |
|----------------------------|------------|---------------|--|
| X.Remove                   | У.         | Mike Jones    |  |
| <u>X</u> - Add             | <u>\$v</u> | Sally Smith   |  |
| Type of Action (Check.One) | Title      | . <u>Namc</u> | <u>Addres</u> s  |
| 1) Change                  | 'VP        | ROIG, DANIA   | 4508 W HENRY AVE   |
| X Add                      |            |               | TAMPA, FL 33615  |
| Remove                     |            |               |  |
| 2) Change                  |            |               |  |
| Add                        |            |               |  |
| Remove                     |            |               | , married was a farming time passages a constitution of the consti |
| 3 ) Changë                 |            |               |  |
| Add                        |            |               |  |
| Remove                     |            |               |  |
| 4) Change                  |            |               |  |
| Àđd                        |            | •             |  |
| Remove                     |            |               |  |
| 5)Change                   |            |               | *s+  |
| Add                        |            |               |  |
| Reinove                    |            |               |  |
| த் Change                  |            |               |  |
| Add                        |            |               |  |
| Remove                     |            |               |  |

To:

| the date of each amendment(s) adoption:  |
|--|
| 07/23/2019   |
| Effective date if applicable: (no moré 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 east 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 7-23-19  |
| Dated 7-23-/9  Signature 1   |
| (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) |
| PARRADO, DASIEL  |
| (Typed or printed name of person signing)  |
| PRESIDENT  |
| (Title of person signing)  |