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(Do	cument Number)	
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R. WHITE

SECRETARY DE STATE
SECRETARY DE PH 8: 18

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	BOHEMIA TRUC ATION:	KING, CORP.	
DOCUMENT NUMB	P16000001882 ER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	MANOEL OLIVEIRA		
-	BOHEMIA TRUCKING, CO	Name of Contact Person ORP.	1
-	4900 SW 97TH AVE	Firm/ Company	<del> </del>
•	MIAMI, FL 33165	Address	· · · · · · · · · · · · · · · · · · ·
•		City/ State and Zip Code	e
MAN	OEL@MATSACCOUNTING	G.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	ee call:	
MANOEL OLIVEIRA		305 at (	2986923
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle eassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

BOHEMIA TRUCKING, CORP.

16 JAN 19 PM 8: 18

(Name of Corpor	ation as currentl	y filed with the Florida	Dept. of State) ETARY OF STAT
P16000001882			TALLAHASSEE FLORIE
(Doc	cument Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this	Florida Profit Corporat	ion adopts the following amendment
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "	Co". A professional co	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A.			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE I</u>	<u>BOX</u> )		
D. If amending the registered agent and/or registered new registered agent and/or the new registered.			e name of the
Name of New Registered Agent			····
	(Florida str	eet address)	
New Registered Office Address:			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agen			ations of the position.
Si	anature of New R	egistered Agent, if change	gina

## 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 Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
X I) Change	P	ANTONIO, A, DE ARAUJO	4900 SW 97TH AVE	
Add			MIAMI, FL 33165	
Remove				
2) Change				
Add				
Remove				
3) Change			·	
Add				
Remove				
4) Change	<del></del>			
Add				
Remove				
5) Change	<u></u>			
Add				
Remove				
0 0				
6) Change				
Add				
Remove				

<del>.</del>				
			1 84 1	
	_			
nge, reclassifica dment if not con	<u>tion, or cancel</u> tained in the a	lation of issued	shares,	
anient ii not con	tamen in the a	menament use	<u></u>	
				<u></u>
	<u> </u>			
	nge, reclassifica	nge, reclassification, or cancell	nge, reclassification, or cancellation of issued	nge, reclassification, or cancellation of issued shares, alment if not contained in the amendment itself:

date this document was signed.	n:, if other than the
JANUARY	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block d document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.
	by the shareholders through voting groups. The following statement 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)
	(voting group)
☐ The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder
JANUARY 11, 20 Dated	1 //V
Signature	
(By a director, selected, by a	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court aciary by that fiduciary)
MAN	OEL OLIVEIRA
<del></del>	(Typed or printed name of person signing)
V	
	(Title of person signing)