## P16000019219

(Re	equestor's Name	)
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Numbe	r)
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	YD NAPO	OLES TRUCKING CORP	
DOCUMENT NUMBER:	P16000019219		
The enclosed Articles of Amend	ment and fee are su	abmitted for filing.	
Please return all correspondence	concerning this ma	itter to the following:	
	•	YOESKY PIEDRA	
	<del></del>	Name of Contact Perso	n
	Y &	D NAPOLIS TRUCKING	G CORP
-		Firm/ Company	
•	100	08 SABINE PLACE	
<del></del> -		Address	
	KI	SSIMMEE, FL. 34759	
		City/ State and Zip Coo	le
	SERG825 @HOT	MAIL.COM	
E-ma	il address: (to be us	sed for future annual report	notification)
For further information concerning	ng this matter, pleas	se call:	<b>401-7873</b>
Name of Contact	Person	\ <u></u>	ode & Daytime Telephone Number
Enclosed is a check for the follow	ving amount made		
	.75 Filing Fee & tificate 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 Addre Amendment Se Division of Con P.O. Box 6327 Tallahassee, FI	ction porations	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## YD NAPOLES TRUCKING CORP

P16000019219	ntly filed with the Florida Dept. of State	)	
	r of Corporation (if known)		
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	is Florida Profit Corporation adopts the f	ollowing amendment(	
. If amending name, enter the new name of the corporation: Y & D NAPOLES TRUCKING CORP		The second	
ame must be distinguishable and contain the word "corpora Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name	The new r the abbreviation e must contain the	
Enter new principal office address, if applicable:	1008 SABINE PLACE	23.	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	KISSIMMEE, FLORIDA 34759	一些影响	
		1	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1008 SABINE PLACE	3	
	KISSIMMEE, FL. 34759	54 6	
. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address			
(Florida	street address)	<del></del>	
New Registered Office Address:	, Florida	(Zip Code)	
ew Registered Agent's Signature, if changing Registered Agenthereby accept the appointment as registered agent. I am familia	nt:	, ,	
	,	***	

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:	, или ош		
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>	Address
1) Change			
Add			
Remove			
2) Change			
, Add			
Remove			
3) Change			
Add			
Remove			
4) Character			
4)Change	<del></del>		
Add Remove			
Kemove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ANGE THE C	sheets, if necessary) PELLING OF THE N		ADDRESSS			
	ELLING OF THE P		ADDICESSS.		<del></del>	
	<del></del>					
			-			
<u> </u>	<u></u>					
n amendmen!	provides for an exc	hange, reclassific	eation, or cancel	lation of issued s	hares	
<u>ovisions for in</u>	<u>nplementing the am</u>	endment if not co	ntained in the a	mendment itself		
(if not applie	cable, indicate N/A)					
				·-		
					· · · · · · · · · · · · · · · · · · ·	
					······································	

The date of each amendment(s)	doption:, if other	than the
date this document was signed.	21/2016.	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed epartment of State's records.	ed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	t for the amendment(s) was/were sufficient for approval	
by	,"	
	(voting group)	
action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and shareholder	
3/21/20 Dated	16	
	775	
Signature	li annual de servicio de la companya del companya del companya de la companya de	
selec	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	SERGIO F TORRERS	
	(Typed or printed name of person signing)	•
	СРА	
	(Title of person signing)	•