P16000033837

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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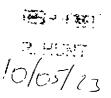
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PIVISION OF CORPORATION OF STATE OF CORPORATIONS



COVER LETTER

Division of Corporations NAME OF CORPORATION: CERVANTES TRUCKING, INC DOCUMENT NUMBER: P16000033837 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALCIDES CERVANTES RODRIGUEZ Name of Contact Person CERVANTES TRUCKING, INC Firm/ Company 3403 NW 35TH AVENUE Address MIAMI, FL 33142 City/ State and Zip Code WILL@TAXEFS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ALCIDES CERVANTES RODRIGUEZ Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
The Centre of Tallahassee

Certified Copy

(Additional Copy is enclosed)

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Articles of Amendment to Articles of Incorporation of

CERVANTES TRUCKING, INC	
(Name of Corporation as currently filed with the Florida Dept. of State))
P16000033837	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation:	ollowing amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abb "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	reviation "Corp.," contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u>~</u> ;
(maining address MAT DE A (OST OTTICE BOX)	——————————————————————————————————————
	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	<u>ئ</u> ہے <u>'''</u>
new registered agent and/or the new registered office address:	PM IZ: 40
Name of New Registered Agent	£
	0 ;
(Florida street address)	
New Registered Office Address:, Florida	
(City)	(Zip Code)
	(Zip Code)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	ALCIDES CERVANTES RODRIGU	3403 NW 35TH AVENUE
X Add			MIAMI FL 33142
Remove			c
2) Change			2923
Add			2023 OCT
Remove 3) Change			က် ဗ
Add			PM 12:140
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4) Change			
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ndment if no	t contained	l in the ame	endment itse	<u>lf:</u>		_
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	ange, reclass	ange, reclassification, onderent if not contained	ange, reclassification, or cancellationment if not contained in the ame	ange, reclassification, or cancellation of issued adment if not contained in the amendment itse	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	ange reclassification, or cancellation of issued shares.

	09/29/2023	
The date of each amendment	•	, if other than the
date this document was signed.	09/29/2023	
Effective date if applicable:	(19/29/2023	
<u></u>	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date with Department of State's records.	II not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
must be separately provide	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
00/20/	2022	
09/29/ Dated	2023	200 200 200 200 200 200 200 200 200 200
	000	IVISION O
Signature	y a director, president or other officer – if directors or officers have not been	-5-1 1-5
se	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
·	ALCIDES CERVANTES	# 51415 #CKANS
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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