P16000054409

Office Use Only



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ERS SULLAND

MAY O 9 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: VANE TRUCK	CORPORATION			
DOCUMENT NUMB	ER:P1600005440	9			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this ma	tter to the following:			
_	HECTOR M. PINEIRO				
		Name of Contact Persor	ı		
	VANE TRUCK CORPO	ORATION			
-		Firm/ Company			
	8178 NW 200 STREE	ET			
-		Address			
MIAMI, FLORIDA 33015					
		City/ State and Zip Code	e		
	HECTORPINEIRO8	34@VAHOO COM			
		sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:	·		
HECTOR M. PIN	EIRO LINARES	at (786	_) 484-4877		
Name o	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:		
S \$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 Divi P.O.	ling Address Indment Section Indicate the section of Corporations Box 6327 Indicate the section of the section	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301		

Articles of Amendment to Articles of Incorporation

VANE TRUCK CORPORATION

(Name of Corporation as cu	urrently filed with the Florida Dept. of State)	3
P16	6000054409	MAN -8
(Document Nu	mber of Corporation (if known)	o
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the follow	ving amendan
A. If amending name, enter the new name of the corporati	ion:	
		The new
name must he distinguishable and contain the word "corp," "Corp,," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevi	" or "Co". A professional corporation name mu	
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 offic	ce address in Florida, enter the name of the	
new registered agent and/or the new registered office a		
Name of New Registered Agent		
		
(Fig.	rida street address)	
·	The content of the co	
New Registered Office Address:	(City), Florida, Florida	ip Code)
	(City) (Zi	ip Coae)
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligations of the position	n .
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>be</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change			VALENTIN A. GARCIA JIMENEZ	4110 NW 79TH AVENUE
X Add		•		APT 2-B
Remove				DORAL, FLORIDA 33166
2) Change	<u>D</u>		JAVIER DE LA ROSA VILLAR	7881 W 36TH AVE
Add			i i i i i i i i i i i i i i i i i i i	UNIT 103
X Remove				HIALEAH, FL 33018-7532
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

ttach additional sheets, if nec	essary). (Be spe	ecific)			
		N/A			
<u> </u>					
					
					<u></u>
					· · · · · · · · · · · · · · · · · · ·
·					
an amendment provides fo	r an exchange, re	classification, or o	cancellation of is	sued shares,	
provisions for implementing	the amendment	if not contained in	the amendment	itself:	
(if not applicable, indica	le N/A)				
		N/A			
					·
				- - · · ·	
				·····	
			 -		

The date of each amendment(s) adoption:	N/A	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :	N/A	
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State		date will not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro-		ent(s)
☐ The amendment(s) was/were approved by the shar must be separately provided for each voting group	cholders through voting groups. The following state p entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment	nt(s) was/were sufficient for approval	
by	,**	
by(voting g	гоир)	
The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and shareholder	older
☐ The amendment(s) was/were adopted by the incoraction was not required.	porators without shareholder action and shareholder	,
Dated04/18/2017		
Signature	or other officer if directors or officers have not be	oon
	ator – if in the hands of a receiver, trustee, or other of	
	,	
HECTO	OR M. PINEIRO LINARES	
(Турс	ed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	