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JUN 20 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALMARAL TRU	CKING CORP	
	BER: P16000082518		
The enclosed Articles	of Amendment and fee are so	ubmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	ALMARAL, ARISNELDO		
		Name of Contact Perso	n
	ALMARAL TRUCKING C	ORP	
		Firm/ Company	
	2347 NW HOWARD AVE		
		Address	
	ARCADIA, FL 34266		
		City/ State and Zip Cod	e
RICE	KY450@HOTMAIL.COM		
	-	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas		
ALMARAL, ARISNI	ELDO	at (5955330
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ting Address Induct Section Sion of Corporations Box 6327 That see: FL 32314	Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

$\Delta 1$	$\Delta A \Delta$	PAL	TRI	JCKING	COPD
2 X I .	VI.^3	AR AL	. IKU	JULINU:	CURP

(Name of Corneration as on	irrently filed with the Florida Dept. of State)
P16000082518	rection med with the Florida Dept. of State)
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation	on;
name must be distinguishable and contain the word "corpo" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," word "chartered," "professional association," or the abbrevia	The new oration." "company." or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ation "P.A."
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 <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, enter the name of the ldress:
Name of New Registered Agent	
· · · · · · · · · · · · · · · · · · ·	vida street address)
New Registered Office Address:	Florida
	(City) (Zīp Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam.	Agent: uliar with and accept the obligations of the position.
Signature of N	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.

X Change	<u>PT</u> <u>John</u>	Doe	
\underline{X} Remove	<u>V</u> <u>Mike</u>	2 Jones	
X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Ricardo Rodriguez	2347 NW HOWARD AVE
X Add			
Remove			ARCADIA, FL 34266
2) X Change	VP	ARISNELDO ALMARAL	2347 NW HOWARD AVE
Add			ANGANIA PLAZZZ
Remove	0		ARCADIA, FL 34266
3) Change	Secretary	Misleydis Rodriguez	4470 29th Ave NE
X Add			
Remove			Naples, FL 34120
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach <i>additional sheets, if necessary)</i>	(Be specific)
,	
	<u> </u>
	
	
an amendment provides for an exch:	ange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the amen</u>	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	
	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
<u>ii appicanic</u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the amendment(ufficient for approval.	(s)
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	vent
"The number of votes cas	t for the amendment(s) was/were sufficient for approvai	
by		
	(voting group)	
☐ The amendment(s) was/were action was not required.	opted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated O6/07/201 Signature (By a	director, president or other officer – if directors or officers have not been	
selecti appoi	ed, by an incorporator — if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	rı
	Arisneldo Almaral	
	(Typed or printed name of person signing)	1
	President	
	(Title of person signing)	