P17000000467

(Re	questor's Name)	-
(Add	dress)	
(AdA)	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

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MAY 1'5 2019

COVER_LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corpo	rations				
NAME OF CORPOR	ATION: YJJ ER: P170	M Truckii 00000467	ng In	<u>C</u>	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this mat	iter to the following:			
_	Arian	na Casana	5		
		Name of Contact Person	1		
		Pasaus: Firm/Company	3		
_		Firm/ Company	ſ '		
	480	/(0 + 1) 5 7 9 Address (5 F L 3 City/ State and Zip Code	ŝĒ		
-		Address			
	Napl	15 FL 3	4117		
_		City/ State and Zip Code	2	***************************************	
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Acian	na Carana	130	200	K7 73	
	Contact Days	at (~ ~ /	du & Danimo T	Janhana Manhan	
Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filir Certificate of Certified Co (Additional is enclosed	of Status opy Copy	
Maili	ing Address	Street	Address		
	ndment Section		ment Section		
Division of Corporations Division of Corporations			ıs		

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301



May 3, 2019

ARIANNA CASANAS 480 16TH ST SE NAPLES, FL 34117

SUBJECT: YJJM TRUCKING INC Ref. Number: P1700000467

We have received your document for YJJM TRUCKING INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

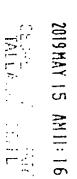
The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 919A00008968

Irene Albritton Regulatory Specialist II



	Articles of Amendia	ieni		20	S 1
	to			50/9	
	Articles of Incorpora	tion		- 7	$3 \times 10^{-2} \text{ s/z}$
	of			• •	7/3° ~~~~
YJJM	Trocking	Inc			P/1/3:
(Name of Corpora	tion as currently filed	with the Fl	orida Dept. o	f State)	, ک
P17	00000046	っチ			
(Doct	ament Number of Corpo	ration (if kr	nown)		- 5/2" =
Pursuant to the provisions of section 607.1006. Floridits Articles of Incorporation:	da Statutes, this <i>Florida</i>	Profit Cor	<i>poration</i> adop	ots the follow	ring amendment(s) t
A. If amending name, enter the new name of the	corporation:				
					The new
name must be distinguishable and contain the wa "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	p," "Inc," or "Co"				
		48 D	16/1	ST	SF

	corporation." "company." or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain to reviation "P.A."
B. Enter new principal office address, if applicable:	480 16th ST SE Naples FL 34117
(Principal office address <u>MUST BE A STREET ADDRE</u>	Naples FL 34117
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	480 16th ST SE Naples FL 34117
	Naples FL 34117
D. If amending the registered agent and/or registered new registered agent and/or the new registered officers.	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)	Title	<u>Name</u>	Address
1) <u></u> Change	P	Arianna Casanas	480 16th STSE
Add			Naples FL 34117
Remove			
2) <u>X</u> Change		Luis E Romero	480 16th ST S Naples FL 34117
Add			Naples FL 34117
Remove			
3) Change			
Add			
Remove			*
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attaen aaann	onal sheets, if neces	ssary). (Be specific)	
Char	rge ad	dress	slease.	
	•	•		
The	address	15: 480 Naple:	0 16 Th	ST SE
		Naple	s FL	34117
			.,	·
			T	rank /00.
				/
				
n amendmer	at provides for an	exchange, reclassific	ation, or cancella	tion of issued shares,
	mplementing the a icable, indicate N/A	amendment if not co f)	ntained in the am	endment itself:
1,		,		
	<u>. </u>			
			<u>. </u>	
			···	
		 		
		•		

The date of each amendment(s) adoption:	
4/22/19	
Effective date if applicable: (no more than 90 days after amendment file date)	<u> </u>
Adoption of Amendment(s) (CHECK ONE)	
☑ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
byone hundred	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated $04/zz/z019$ Signature Pasaush	
Signature Pasaus ?	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	