## P170000021720

(Requestor's Name)	
(Address)	
(Address)	
(1881555)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	<u>                                  </u>
Certified Copies Certificates of	Statu <b>s</b>
Special Instructions to Filing Officer:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

. ,	
NAME OF CORPORATION: _ HOLC &	MB'S TOWING & TRANSPORT INC
DOCUMENT NUMBER: P1700	TOD 21720
The enclosed Articles of Amendment and fee are	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
JEREMY	HOLCOMIS
ľ	Name of Contact Person
JEREMY H	Name of Contact Person  SolComb's SEAFOOD INC  Firm/ Company
1241 FR	9NC,5 57 Address
ST. Due us	Address TINE FL 32084
<i>J </i>	City/ State and Zip Code
wheeldeals	City/ State and Zip Code  Cyma, J. Com  sed for future annual report notification)
E-mail address: (to be a	sed for future annual report notification)
For further information concerning this matter, plea	  se call: 
JEREMY HOLCOMB	at (904) 508-1158
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:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee  Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Distinct of Communications	Olimbrian of Communications

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

HOLCOMB'S TOW.	NG & T	RANSPORT	INC	
		filed with the Florida Dep		
P17000	00217	20 Corporation (if known)		
(b	ocument Number of	Corporation (if known)		
Pursuant to the provisions of section 607,1006, F its Articles of Incorporation:	  orida Statutes, this      	Florida Profit Corporation a	dopts the following amen	dment(s) to
A. If amending name, enter the new name of t	ii —			
JEREMY HOLCOM	B5 56	AFOOD INC	The	new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "oword "chartered," "professional association," o	word="corporation Corp," "Inc," or "(	i," "company," or "incorpe Co". A professional corpore P.A."	orated" or the abbrevio ation name must contain	ition i the
B. Enter new principal office address, if applications and applications and applications are applications.		102 MARSH		
(Principal office address <u>MUST BE A STREET</u>	ADDRESS )	ST. AUGUSTI	NE FL	<i>3208</i> 6
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	 	1241 FRA	NC15 ST	
(making duaress MAT BE A FOST OFFICE		1241 FRAI SAINT AUG	<u> </u>	
	\ <u>\</u>	SAINT AUG	USTINE, FC	<u>.</u> 3208
			•	
D. If amending the registered agent and/or registered agent and/or the new registered.			ne of the	
Name of Van Brainsand Array	1/2			
Name of New Registered Agent	11 // // 1	<del></del> .	,	
<del></del>	/El : 1 .			
	(Florida stre	ret daaress) 		
New Registered Office Address:	11 2/1		, Florida	
	i i	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	   Registered Agent:			
I hereby accept the appointment as registered ago			s of the position.	
		ſ	_*·	
	Af	/_	<b>科的 第</b>	
<del> </del>	Signature of New R	11 egistered Agent, if changing		h-traggerie
		Same and the same of the same	第2日 AS	• •
	\		- S	
			(M <sub>C</sub> ) ∞ (10)	
			2003 2003 2003 2003 2003	
	Pane 1	of A	四注 💆	

Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	= Chief . er, Direct l in the fo ives the o	Financial Office or would be PTL Mowing manner corporation, Sall	r. If an officer/director holds mor D. Currently John Doe is listed as th y Smith is named the V and S. Thes	Trustee; C = Chairman or Clerk; CEO = Chief et than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is see should be noted as John Doe, PT as a Change,
Example: X Change	<u> T9</u>	John Doe		
X Remove	$\underline{\mathbf{v}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name 		<u>Addres</u> s
1) Change	<u>S</u>	_ <u>J</u> e	prifer Hill	102 MARSHALL CIRCLE
X_ Add				SI ANGUSTINE, FL 32086
Remove		J	3/11/K	<del></del>
2) Change	<u>C</u>	• 1	Williams	103 MARSHALL CIRCLE
_X_ Add				SI AMGUSTINE FL 32086
Remove	_			
3) Change	$_{\rm D}$	_ Iii	n Kennedy	102 MARSHALL CIRCLE
Add			_	ST. AUGUSTINE FL 32086
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				<del></del>
6) Change				
Add				
Remove				

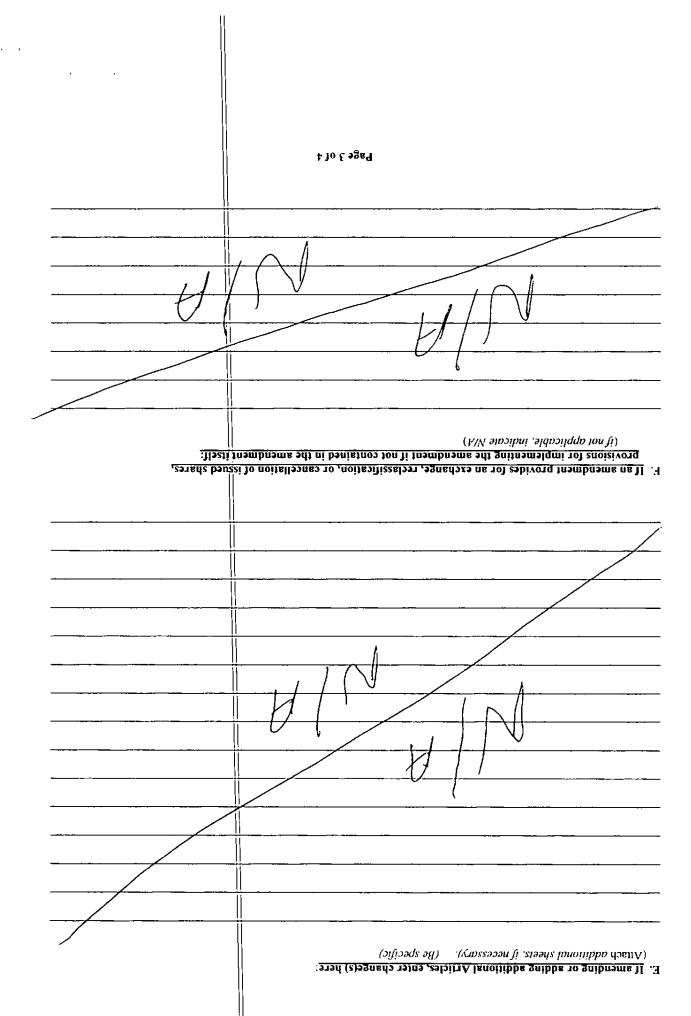
Page 2 of 4

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:

Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)



• •	11	,		
The date of each amendment(s) adoption date this document was signed.	: Augus	+ 2200	2017	, if other than the
date this document was signed.				
Effective date if applicable:	August	2200	2017	
	(no more than	90 days after amendme	nt file date)	
Note: If the date inserted in this block document's effective date on the Departme		licable statutory filing r	equirements, this date v	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient		he number of votes east	for the amendment(s)	
☐ The amendment(s) was/were approved to must be separately provided for each verified to the separately provid				
"The number of votes cast for the	amendment(s) was/w	ere sufficient for approv	/al	
by			., 	
	(voting group)			
☐ The amendment(s) was/were adopted by action was not required.	the board of directo	rs without shareholder a	ction and shareholder	
The amendment(s) was/were adopted by action was not required.	the incorporators w	ithout shareholder action	and shareholder	
Dated Augus	L 3,5t	2017		
	1	2/2.1		
		/ Julian	• • •	
(By a director,	president or other of	ficer – if directors or off the hands of a receiver, i	icers have not been	
	ciary by that fiduciar		trustee, or other court	
y appointed rida		<i>)</i>		
	JERENY	HOLLON	nB	
	(Typed or printe	d name of person signin	g)	
	PRF	SIDENT		
	(Titl	c of person signing)		