## P1700046126

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## COVER LETTER

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TO: Amendment Section Division of Corporations NAME OF CORPORATION: ACE TRUCKline INC DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Hyas SMITH SR.
Name of Contact Person 1397 FERNLEA DR B. FL 334,7 City/ State and Zip Code Clias, senior 21e Yahov. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (\_\_\_\_\_\_)
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section + Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## Articles of Amendment

to

Articles of Incorporation

Of

ACE TRUCKLINE INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P17 0004 0 120

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

me must be distinguishable and contain the wo		
Corp.," "Inc.," or Co.," or the designation "Corpord "chartered," "professional association," or the	p, mc. or Co . A projessiona e abbreviation "P.A."	i corporation name must contain
Enter new principal office address, if applicable principal office address MUST BE A STREET AD		
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u>OX</u> )	
If amending the registered agent and/or regist- new registered agent and/or the new registered		r the name of the
Name of New Registered Agent		·
	(Florida street address)	
. ———		, Florida
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Office Address:  ew Registered Agent's Signature, if changing Re		(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:

1

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>	John Doc	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)  1) Change Add Remove	Title  V	Harold LEE SMITH WEST PAIM BEAUCH,	1397 FERNICH DE W.P.B., FL 33417
2) Change Add Remove	<del></del>		
3 ) Change Add Remove			
4) Change Add			
Remove  5) Change  Add  Remove			
6) Change Add			

	ecessary). (Be sp	ter change(s) here: ecific)			
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		eclassification, or c	ancellation of issue	d shares,	
an amendment provides	for an exchange, r				
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The date of each amendment(s) adoption: _ date {his document was signed.	11.29-2017	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, of State's records.	this date will not be listed as the
Adoption of Amendment(s) ( <u>C</u>	CHECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo	ne shareholders. The number of votes east for the ameno approval.	lment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voti.	the shareholders through voting groups. The following any group entitled to vote separately on the amendment(s	statement S)
"The number of votes cast for the an	nendment(s) was/were sufficient for approval	
by	voting group)	
(1	voting group)	
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors without shareholder action and shareholder	reholder
☐ The amendment(s) was/were adopted by the action was not required.	ne incorporators without shareholder action and sharehol	lder
Dated $11-29-$ Signature $AC_i$ as	2017	
Signature Allias	SO SR	
(By a director, pr selected, by an ir	resident or other officer – if directors or officers have no accorporator – if in the hands of a receiver, trustee, or oth ary by that fiduciary)	
Al	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	<del></del>
	Precident	
	(Title of person signing)	<del></del>