## P17000 047 221

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	<del>.</del>
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: TRUEWAY TRUE	CKING CORP		
	BEŘ: P17000047221			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	EDDY SAAVEDRA CRUZ			
		Name of Contact Perso	n	
	TRUEWAY TRUCKING CO	ORP		
		Firm/ Company		
	125 S STATE RD 7, SUITE			
		Address		
	WELLINGTON, FL 33414			
	<del></del>	City/ State and Zip Cod	e	
trues	vaytruckingcorp@gmail.com			13 (6)
		sed for future annual report	notification)	
	12 W. 11 12 12 13 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	ou in tale a man report		دئت
For further information	on concerning this matter, pleas	se call;		70
EDDY SAAVEDRA		at (	307-7785	र _ ३
Name	of Contact Person		de & Daytime Telephone Number	_ (L)
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:	
S35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division Cliftor 2661 E	Address  Iment Section on of Corporations on Building Executive Center Circle assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

TDI	TEXM A	VTD	LICKTING	$C \cap DD$
1 K I	JE W 2	TIK	LIL N HINE	A A JICE

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)		
P17000047221				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following	ig amei	ndment(s) to
ec.  A. If amending name, enter the new na	ame of the corporation:			
N/A	•			
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the a "Co". A professional corporation name must "P.A."	bbrevi	
B. Enter new principal office address,	if applicable:			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )			-
			<del></del>	
			2	
C. Enter new mailing address if and	<b>L</b> l		-1	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			۵.	· r
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••		<del> </del>	<del></del>	<del></del>
r.'			သူ	=======================================
⊀ t <sub>w</sub>				<del>-</del>
D. If amending the registered agent an new registered agent and/or the new				
Name of New Registered Agent	EDDY SAAVEDRA	<del>,,,,</del>	<del></del>	
	125 S STATE RD 7. SUI	TE 104-109		
4_	(Florida s	treet address)	-	
-	WELLINGTON	33414		
New Registered Office Address:		(City), Florida (Zip	Code)	
		(City) (Ep	Civiley	
New Registered Agent's Signature, if c	hanoina Registered Agen	ıt.		
		with and accept the obligations of the position.		
·	KTA		_	
•	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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	r <u>P</u>	TATIANA C IZQUIERDO	125 S STATE RD 7, STE 104-109
Add			WELLINGTON, FL 33414
X Remove			
2) Change	<u>P</u>	EDDY SAAVEDRA	125 S STATE RD 7, STE 104-109
X Add			WELLINGTON, FL 33414
Remove	,		
3) Change			
Add			
Remove			<del></del>
4) Change		<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
	<del></del>
-	
an amendme	nt provides for an exchange, reclassification, or cancellation of issued shares,
provisions for	implementing the amendment if not contained in the amendment itself:
(if not app	licable, indicate N/A)

		, if other than the
date this document was signed.		
10/ Effective date <u>if applicable:</u>	07/2019	
enective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	<b></b> .	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
10/19/201	9	
Dated	<del>/</del>	
Signature		
	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
	nted fiduciary by that fiduciary)	
,	TATIANA C IZQUIERDO	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	

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