P17000065961

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TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Morales & Hiss Inc.
DOCUMENT NUMBER: <u>P170000 65961</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sebastian Morales Name of Contact Person
Morale & Hips Inc Firm/ Company
St Cloud, Florida, 347 64 City/ State and Zip Coes
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Se past van Morales at (321) 8051595 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 Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	01
Morales & Highs Inc (Name of Corporation as curred) 170000 65961	
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P170000 65961	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	1
N/A	The new
name must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.,	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office address Name of New Registered Agent	ress:
Name of New Registered Agent 40 / 1	<u> </u>
(Florida	street address)
New Registered Office Address:	, Florida (City) (Lip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	ent:
I hereby accept the appointment as registered agent. I am familia	

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s, 607.0120 (11) (c), F.S.

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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 Doc				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Nar</u>	<u>ne</u>		<u>Addres</u> s	
1) Change		_				
Add						
Remove						
2) Change				 	- "	
Add						
Remove 3) Change				 		
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_		 _		
Add						
Remove						<u>— —</u>
6) Change						
Add						
Remove						

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
The corporation experies in handyman services and in
The corporation espages in handyman services and, in addition, shall provide connercial preight transportation services using van-type vehicles. These services may include, but are not limited to, the transportation of various types of poods, logistics support, and last-
services using von-type relatives. There services nox
include but are not basted to the transportation
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r. It an amendment provides for an exchange, regrassorcation, or cancensorm or essential provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A
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The date of each amendment(s) adoption: 03/05/2018/	_, if other than the
date this document was signed.	
Effective date if applicable: 03/05/2025	
Effective date if applicable: 03/05/1025 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and saction was not required.	shareholder
☐ 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 cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated_03/04/2075 Signature	
(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)	
(Title of person signing)	

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