# P17000081714

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#### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: \_\_\_\_\_

DOCUMENT NUMBER: P17000081714

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JULISSA ROSADO

Name of Contact Person-

DCM SERVICES CENTER INC

Firm/ Company

2529 W BUSCH BLVD STE 1000

Address

TAMPA, FL 33618

City/ State and Zip Code

DCMSERVICESCENTER@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 JULISSA ROSADO
 at (813 ) 9908630

 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

S43.75 Filing Fee & Certificate of Status El\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) El\$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 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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## Articles of Amendment to Articles of Incorporation of

LPQ TRUCK SERVICE INC

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

P17000081714

(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:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. <u>Enter new principal office address</u> , (Principal office address <u>MUST BE A S</u>				
<ul> <li>C. <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u>)</li> <li>D. <u>If amending the registered agent ar</u> new registered agent and/or the new</li> </ul>	od/or registered office address in		2021 JUN 24 AH 10: 42	ایو دوره ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا
	DCM SERVICES CENTER INC			
<u>Name of New Registered Agent</u>	7208 N ARMENIA AVENUE			
	(Florida street addr	CN1		
New Registered Office Address:	ТАМРА	, Florida <sup>33</sup>	360-1	
	(Číņ)	<u> </u>	(Zip Code)	

<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.

Signinire, of New Registered Agent, if changing

Check if applicable

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

# 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:

John Doe

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

,

 $\underline{PT}$ 

<u>X</u> Remove	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
L) Change	VP	JUAN C HERRERA ALFONSO	2535 SIESTA CT APT 4
XAdd			TAMPA, FL 33614
Remove			
2) Change		<u> </u>	
Add			<u> </u>
Add			
Remove			
4) Change	. <u>.</u>		
Add			
Remove			
57 Change			
Add			·
Remove			
6) Change			
Add			
Remove			

( Attack	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
(Attact	ananona success (precessory). (in specific)	
		<u></u>
		·
<u></u>		
. <u>II an a</u> nrovi	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself:	
<u>p: (</u> ,	if not applicable, indicate N/A)	
		<u> </u>

•		
The date of each amendment(s) adoption:	if other	r than the

date this document was signed.

Effective date if applicable:

(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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (C

(CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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)

6/21 2021 Dated

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)

LUIS PEREZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)