P170000 94220

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HOUSEHO	LD GOOD CAPPIER SERVICE INC						
DOCUMENT NUMBER: P1700	00084220						
The enclosed Articles of Amendment and fee are su	bmitted for filing.						
Please return all correspondence concerning this matter to the following:							
AL	MAZ GAREEV						
	Name of Contact Person						
HOUSEHOLD GO	OD Carrier Service INC						
	Firm/ Company						
17570 ATLF	INTIC BLVD 212						
	Address						
SUNNY KLE	City/ State and Zip Code						
	City/ State and Zip Code						
ga	gareeva@gmail.com						
E-mail address: (to be us	sed for future annual report notification)						
For further information concerning this matter, plea	se call:						
A (000 co	20 000 05:10						
HUMAZ LOARGEV	ar (786) 806 9542						
Name of Contact Person Area Code & Daytime Telephone Numb							
Enclosed is a check for the following amount made	payable to the Florida Department of State:						
\$35 Filing Fee \$\sum \text{S43.75 Filing Fee & Certificate of Status}	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 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	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810						
rananassee, i'll 52514	2413 IN. MIDITOG SHECK, SUNC 610						

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

HOUSEHOLD GOOD CARRIER SERVICE INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P17000084220	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	amendment(s) to
A. If amending name, enter the new name of the corporation:	
TASY ROAD MOVING & STORAGE INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip C New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	SECULTARY OF STATE OF STATE OF STATE OF CORPORATE OF CORP
Signature of New Registered Agent, if changing	3
Charle if analisable	

☐ 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:

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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		-		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach addition	r adding additional Ar nal sheets, if necessary).	(Be specific)				
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<u>-</u>						
						
						_
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lf an amendn provisions fo	ent provides for an exc r implementing the am	hange, reclassifi endment if not c	ication, or canc	ellation of issued	shares, f	
(if not ap	plicable, indicate N/A)	sament n not t	variamen an int	water that	<u>:</u>	
						ν.
		<u>.</u>				
					<u> </u>	
						
	<u>.</u>					

The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 a	lays after amendment file date)
Note: If the date inserted in this bl document's effective date on the De		le statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or boa	ard of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	=	umber of votes cast for the amendment(s)
		gh voting groups. The following statement te separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were	sufficient for approval
by		
	(voting group)	
Dated03	100/200 A. mfmg	
Signature	M. unfund	
selected		- if directors or officers have not been ands of a receiver, trustee, or other court
	ALMAZ 6	DAREEV me of person signing)
•	(Typed or printed na	me of person signing)
	PRESIDE	NT
	(Title of person signi	ng)