P18000/6758

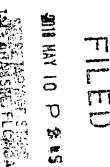
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ALL FLORIDA TR	UCK SERVICE & REPAI	R, INC.		
DOCUMENT NUMBER:	P18000016758				
The enclosed Articles of An	nendment and fee are sul	omitted for filing.			
Please return all correspond	ence concerning this mat	ter to the following:			
LEV	I LAMB				
ALL	Name of Contact Person ALL FLORIDA TRUCK SERVICE & REPAIR ,INC				
2021	Firm/ Company 2021 TALLEVAST ROAD SUITE -C				
SAR	Address SARASOTA, FL 34243				
		City/ State and Zip Code	2		
	LPOINTSEQUIPMENT				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information cond	cerning this matter, pleas	e call:			
LEVI LAMB		941 at (685-1141		
Name of Cor	ntact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for the f	following amount made p	ayable to the Florida Depa	rtment of State:		
■ \$35 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)		
Division o P.O. Box	nt Section of Corporations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building Necutive Center Circle ssee, FL 32301		

Articles of Amendment to Articles of Incorporation

FILED

ALL FLORIDA TRUCK SERVICE & REPAIR , INC.	MIN HAY 10 P 2 45
(Name of Corporation as curr	rently filed with the Florida Dept. of State)
P18000016758	TALEAHAS SEES TO STATE
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation ALL FLORIDA FLEET SERVICE, INC.	1: The new
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviat	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Floria	da street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	
Signature of N	ew 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.

Example: X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change	<u></u>		
Add			
Remove			
4) Change			
Add ·			
Remove			
5 . 01			
5) Change			
Add			
Remove			
6) Change			
Add			
R <i>e</i> move			

Attach ad	ing or adding addi Iditional sheets, if n	ecessary). (Be	specific)			
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Lan ame	endment provides f	for an exchange.	reclassification	ı, or cancellatio	n of issued shares	<u>.</u>
<u>provisio</u> (if no	ns for implementin ot applicable, indica	ate N/A)	<u>nt II not contall</u>	ned in the amend	iment itself:	
				-:		
		 				
				· · · · · · · · · · · · · · · · · · ·		
					<u> </u>	Fried 8 C 8 Fried A. The Control of Control
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The date of each amendment(s) adoption:		, if other than the
date this document was signed. 05:07/2018		
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, this do of State's records.	ate will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendment(or approval.	s)
	the shareholders through voting groups. The following stateming group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the an Shareholders by	nendment(s) was/were sufficient for approval	
	voting group)	
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors without shareholder action and shareholder	er
action was not required.	he incorporators without shareholder action and shareholder	
Dated 05-07-2	2018	
Signature	resident or other officer - if directors or officers have not been	
	ncorporator – if in the hands of a receiver, trustee, or other cour ary by that fiduciary)	rt
La	1. Lamb	
1/ 1/	(Typed or printed name of person signing)	
<u></u>	(Title of person signing)	