

P1800002143

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(City/State/Zip/Phone #)

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: SOL Trucking Inc  
DOCUMENT NUMBER: P18000024143

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

Please return all correspondence concerning this matter to the following:

Louides y Rodriguez  
Name of Contact Person

SOL Trucking Inc  
Firm/ Company

13727 SW 152nd St #340  
Address

Miami FL 33177  
City/ State and Zip Code

lmanagementystems@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louides y. Rodriguez at (786) 972-8039  
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  
☐ \$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

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

SOL Trucking Inc

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

218000024143

(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:

LR Management Systems Inc 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. 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 Lourdes Y. Rodriguez  
13727 SW 152nd St #340  
(Florida street address)

New Registered Office Address: Miami, Florida 33177  
(City) (Zip Code)

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.

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.

**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                    V       Mike Jones

X Add                        SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>Change</u>	<u>P</u>	<u>Lourdes Y Rodriguez</u>	<u>13727 SW 152nd St</u>
<u>X</u> Add			<u>#340</u>
<u>Remove</u>			<u>Miami FL 33177</u>
2) <u>Change</u>	<u>P</u>	<u>Ibis Bernal</u>	<u>2941 SW 35th Ave</u>
<u>Add</u>			<u>Miami FL 33133</u>
<u>X</u> Remove			
3) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
4) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
5) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
6) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			

(Attach additional sheets, if necessary). (Be specific)

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
(if not applicable, indicate N/A)

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: MAY 1, 2023  
(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) (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)

Dated MAY 17, 2023

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)

Louises Y. Rodriguez  
(Typed or printed name of person signing)

President  
(Title of person signing)

# BILL OF SALE

Date Sold: 4/19/2023

## SELLER'S

Printed Name: Ibis Y Bernal  
Address: 2941 SW 35TH ave  
City: MIAMI  
State: FL Zip: 33133  
Home Phone: 786-250-2303  
Cell Phone: 786-2502303  
Work: 786-250-2303

## BUYER'S

Printed Name: Lourdes Y Rodriguez  
Address: 10620 SW 146th CT  
City: MIAMI  
State: FL Zip: 33186  
Home Phone: 786-972-8039  
Cell Phone: 786-972-8039  
Work: 305-420-6661

## INFORMATION ON ITEM THAT WAS SOLD

100% Full Corp

Sol Trucking Inc

No Assets

No Liabilities

For the sum of \$ 4,000 . Payment in form of Cashier Check  
(Item's Value) (form of payment)

I, THE UNDERSIGNED, HEREBY SWEAR OR AFFIRM THAT I THE SELLER OF THE ITEM DESCRIBED HEREIN AND THAT THE INFORMATION PROVIDED IN THIS BILL OF SALE IS TRUE AND CORRECT TO THE BEST OF MY BELIEF.

Signature of Seller: Ibis Bernal

Date: 4/19/2023

Signature of Buyer: [Signature]

Date: 4/19/2023

