Division of Corporations **Electronic Filing Cover Sheet**

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(((H21000272022 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : I20140000047 Phone : (813)774-4726 Fax Number : (813)877-2186

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**Ent	er	the	email	address	for	this	busin	ess	entity	to	be	used	for	futur
				t mailin										

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN FEDERAL OIL TRANSPORT INC

Certificate of Status	0
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COVER LETTER

Division of Corpora	n itions						
NAME OF CORPORA	TION: FEDI	ERAL OIL	TRANSPORT INC				
DOCUMENT NUMBE	R: P1800002	8176					
The enclosed Articles of	Amendnient :	and fee are	submitted for filing.				
Please return all correspo			=				
FL	JENTES, ALI	FREDO					
			Name of Contact:	Person			
FE	DERAL OIL	OIL TRANSPORT INC					
		Firm/ Company					
463	6 WHISPER	ING WIND	AVE				
m.		Address					
• 1A	MPA, FL 336	614					
			City/ State and Zip	Code			
	nth@live.con						
	E-mail addre	ess: (to be u	sed for future annual re	eport n	otification)		
For further information co	İ						
FUENTES, ALFREDO			813		、6136438		
Name of Co	ontact Person		Are	a Code) 6136438 & Daytime Telephone Number		
Enclosed is a check for the	following an	nount made	payable to the Florida	Depart	ment of State:		
፟ S35 Filing Fee	□\$43.75 Fil Certificate	ing Fee & of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)		S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Amendm Division of P.O. Box Tallahass		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

FEDERAL OIL TRANS	SPORT DIC	
D19000039176	(Name of Corporation as currently filed with the Florida Dept. of State)	
P18000028176		
	(Document Number of Corporation (if known)	
Pursuant to the provision its Articles of Incorporati	ns of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following ion:	amendment(s) to
A. If amending name, e	enter the new name of the corporation:	
nama must be dissing a 1.1.	· // · · · · · · · · · · · · · · · · ·	he new
"Ina," or Co.," or the "chartered," "profession	able und contain the word "corporation," "company," or "incorporated" or the abbreviation designation "Corp," "http://or "Co". A professional corporation name must contain tal association," or the abbreviation "P.A."	"Corp.," the word
B. Enter new principal of Princ	office address, if applicable: MUST BE A STREET ADDRESS)	,
C. Enter new mailing ac (Mailing address MA)	Y BE A POST OFFICE BOY	
D. If amending the regis	stered 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 Reg	vistored Apens	
	estered Agent	
	(Florida street address)	
Now Province of 17	,	
New Registered O	Florida	
	(City) (Zip Code	2
ew Registered Agent's S	Signature, if changing Registered Agent:	
петену ассері іне аррыпі.	linent as registered agent. I am familiar with and accept the obligations of the continue	. ~
	T T	2021 JUL
	Án.	를 들
•	Signature of New Registered Agent, if changing	
heck if applicable	Cognitive of their negistered Agent, if changing	
The amendment(s) is/are	c being tiled pursuant to s. 607.0120 (11) (c), F.S.	TED
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	**************************************	7
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(Attach additional shee Please note the officer: P = President; V= Vic Executive Officer; CFO President, Treasurer, I. Changes should be not a change, Mike Jones !	ets, if neces (director tit te Presiden D = Chief F Director wo ed in the fo leaves the c	sury) Je by the first letter of the office title: Je T = Treasurer: S = Secretary: D = Director; The inancial Officer. If an officer/director holds more wild be PTD.	Teer/director being removed and title, name, and P = Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office held. the PST and Mike Jones is listed as the V. There is ese should be noted as John Doc, PT as a Change,
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>S_</u>	BUSTAMANTE, KAREN	4636 WHISPERING WIND AVE
X Add			TAMPA, FL 33614
Remove	_		
2) Change	S	MILIAN GUTTERREZ, ISNEL	5839 W 13TH AVE
Add			HIALEAH, FL 33012
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
			†

The date of each amendment(s) date this document was signed.	adoption:, if	other than the
Effective date if applicable:	7/7/21	•
	(no more than 90 days after amendment file date)	<u>i</u>
Note: If the date inserted in this document's effective date on the I	block does not meet the englishing of	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were according was not required.	opted by the incorporators, or board of directors without shareholder action and sharch	older
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.	
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	
by		
:	(voting group)	; ;
2-7-010	irecter, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) FUENTES, ALFREDO (Typed or printed name of person signing) PRESIDENT (Title of person signing)	
	SECRETARY OF SIATE TALLAHASSEE, FLORIDA	FILED 2021 JUL 15 AH 9: 47