Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000157729 3)))



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	Division of Corporations			
	Fax Number	:	(850)617-6380	
From:				
	Account Name	e :	TRUCKING PERMITS AND MORE LLC	
	Account Numi	ber :	120140000047	
	51	_	(012)774 (724	

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

: (813)877-2186

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN YOVANY TRUCKING SVCS INC

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MAY 23 2018

TO: Amendment Section

## COVER LETTER

Division of Cor	porations					
NAME OF CORPU	YOVANY TRUCI	KING SVCS INC				
DOCUMENT NUM	P18000040337  BER:					
The enclosed Article	s of Amendinent and fee are si	aboutted for filing				
	espondence concerning this ma	•				
rieuse teutin an cono	espondence concerning his ma	mer to the following.				
	MYRIAM VARGAS					
	Name of Contact Person					
	TRUCKING PERMITS & MORE LLC					
	Firm/ Company 1721 W HILLSBOROUGH AVE					
	Address					
	TAMPA FL 33603					
		City/ State and Zip Cod	¢			
For further information	E-mail address: (to be u	sed for future annual report	notification)			
MYRIAM VARGAS	3	813 at (	7744726			
Name	of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check f	or the following amount made	payable to the Florida Dept	irtment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐543.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address		Street Address				
	Amendment Section		Amendment Section Division of Corporations			
Division of Corporations P.O. Box 6327		Clifton Building				
	llahassee, FL 32314	2661 Executive Center Circle				
		Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of

	currently filed with the Florida Dept. of State)	
18000040337		
(Document N	Number of Corporation (if known)	
ursuant to the provisions of section 607,1006, Florida States Articles of Incorporation:	ntes, this Florida Profit Corporation adopts the fol	lowing amendment(
. If amending name, enter the new name of the corpor:	ration:	
		The new
ame must be distinguishable and contain the word "co Corp.," "Inc.," or Co.," or the designation "Corp.," "li- ord "chartered," "professional association," or the abbre	nc," or "Co". A professional corporation name i	
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	<u> </u>	
	-	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		57.
. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, enter the name of the	7
·	<u>Carolicas</u>	ORIDA
Name of New Registered Agent		
	Florida sireri address)	
f f		
New Registered Office Address:		

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 = ChiefExecutive Officer: CFO = Chief Financial Officer. If an officer/director bolds 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 Doe	
X Remove	$\underline{\mathbf{y}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Nank</u>	<u>Addres</u> s
X 1) Change	P	HERNANDEZ GARCIA, YOVANY	11208 GATE HOUSE DR
Add			TAMPA FL 33625
Remove			
2) Change			
Add			<del></del>
Кепюче			
3)Change		_	
Add			
Remove			
4)Change			
Add			
Remove			
51 Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

Page 2 of 4

Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an exch provisions for implementing the ame	ange, reclassification,	or cancellation of	issued shares, of itself:	
(if not applicable, indicate NtA)			<u></u>	
<del>.</del>				

. .

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment fil	
(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHEÇK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	he amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The formula he separately provided for each voting group entitled to vote separately on the one	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The americanent(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
5/22/18	
Duted	
Signature Yosany Garcia Hornandez	
Signature <u>Horary Garcia Hernandes</u> (By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
HERNANDEZ GARCIA, YOVANY	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	<del></del>