## P1800046710

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1ALLANIASSEE, FLORIDA

NOV 2 6 2018 S. YOUNG

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

.

NAME OF CORPOR	ATION: CAMOA TRUCK	CORP		
DOCUMENT NUMB	D10000044710			
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.		
Please return all corresp	pondence concerning this ma	tter to the following:		
2	ARELYS SANCHEZ PERE	Z		
•		Name of Contact Person	n	
•	CAMOA TRUCK CORP			
-		Firm/ Company		
É	22255 SW 119TH AVE			
_		Address		
1	MIAMI, FL 33170			
_		City/ State and Zip Cod	e	
4GLO	BALCORP@GMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
ARELYS SANCHEZ PEREZ		at (		
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment 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			Address	
	idment Section ion of Corporations	Amendment Section Division of Corporations		
	Box 6327		Building	
Talla	hassee, FL 32314		xecutive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

$C^*\Lambda$	3.4	$\Omega$	TRI	UCK.	COI	ą p
~ r	111	w	111	-		

	ly filed with the Florida Dept. of State)
P18000046710	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or " word "chartered," "professional association," or the abbreviation "	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	AA
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 new registered agent and/or the new registered office address	ress in Florida, enter the name of the
	-
Manager of Manager Description of August	
Name of New Registered Agent	
	reet address)
	reet address)

If almending 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 Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	P	MIGUEL A. HERNANDEZ SANCH <b>EZ</b>	22255 SW 119TH AVE	
Add			MIAMI, FL 33170	
X Remove				
2) Change	VP	ARELYS SANCHEZ PEREZ	22255 SW 119TH AVE	
Add			MIAMI, FL 33170	
X Remove				
3)Change	P	ARELYS SANCHEZ PEREZ	22255 SW 119TH AVE	
X Add			MIAMI, FL 33170	
Remove				
4) Change	S	MIGUEL A. HERNANDEZ SANCH <b>EZ</b>	2255 SW 119TH AVE	
X Add			MIAMI, FL 33170	
Remove				
5) Change	-			
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
		_
* · · · · · · · · · · · · · · · · · · ·		
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	<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 file date)	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east for the amendment(s) was/were sufficient for approval	
by (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareh action was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	r
11/09/2018 Dated	
Signature Aulys Samely Pary	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
ARELYS SANCHEZ PEREZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	<del></del>