Florida Department of Star Division of Compartions Electronic Filing Cover Sheet



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.

(((H18000263746 3)))



H180002637483ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : A & L CARRIER SERVICES INC.

Account Number : I20110000033 Phone : (786)360-2879 Fax Number : (786)362-5270

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

Email Address: in 1860 a call ill cervices . Com

SF T T T

18 SEP LL PH 1:33 SECRETARY (V. C.) -ALLAHASSE (C. C. C.) -

COR AMND/RESTATE/CORRECT OR O/D RESIGN POWER ROAD INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

SEP 12 2018

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

TO: Amendment Section

COVER LETTER

Division of Corpo	rations		
NAME OF CORPOR	ATION: POWER ROAD I	NC	
DOCUMENT NUME	D40000047000		
The enclosed Articles	of Amendment and fee are su	bmined for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	CONCECCION PASOS D	E HERNANDEZ	
		Name of Contact Person	
	POWER ROAD INC		
		Firm/ Company	
	2416 SE 19 CT		
	· <u> </u>	Address	· · · · · · · · · · · · · · · · · · ·
	HOMESTEAD , FL 33035		
•	 -	City/ State and Zip Cod	e
INFO	@ALCARRIERSERVICES	.COM	,
		sed for future annual report	notification)
	·	•	,
For further information	concerning this matter, pieas	se call:	
LIZ GONZALEZ		at (786	360-2879
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:
■ \$35 Filing Fee	☐S43.75 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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Apiendment to Articles of Incorporation of

POWER ROAD INC		·
(Name o	Corporation as currently	y filed with the Florida Dept. of State)
P18000047088		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1906, Florida Smutes, this a	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	nie of the corporation:	•
"Carp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "i tion," or the abbreviation "i	The new n." "company," or "incorporated" or the abbreviation Co". A professional corporation name inits contain the P.A."
B. Enter new principal office address, (Principal office address MUST BEAS		SEP 1
C. Enter new mailing address, if applied (Mailing address MAY BE A POST)	OFFICE BOX)	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address:	ess in Floridu, enter the name of the
Name of New Registered Agent	JOEL VEGA TORRES	<u>.</u>
	2416 SE 19 C?	
New Registered Office Address:	(Florida stre	eet address)
	-	(City) (Zip Code)
New Registered Agent's Signature, if ell I hereby accept the appointment as regist	ered agent. I am familiar w	will and accept the obligations of the position. cgtstered 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, SY as an Add.

X.Change	PT	Ichn Doe			
X Remove	v	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	<u>р</u> ~	CONCECCION PASOS DE HER	2416 SE 19 CT		
Add			HOMESTEAD , FL 33035		
X Remove					
2) Change	P	JOEL VEGA TORRES	2416 SE 19 CT		
X Add			HOMESTEAD , FL 33035		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change			·		
Add					
Remove					
δ) Change					
Add					
Remove					

If smending or adding additional Attach additional sheets, if necessor	LArticles, enter chang ury). (Be specific)	e(s) here:		
				<u> </u>
•				
				_
				
•	·			
				
·		<u> </u>		
				
				•
				
_				
	• •			
· ·				
<u> </u>				
f an amendment provides for an provisions for implementing the (if not applicable, indicate N	e amendment if not co	ation, or cancellation ntained in the amend	of issued shares, lment itself:	
				
		<u></u>		
	.			·
<u> </u>				

	C9/05/2018	
The date of each amendment(s)		other than the
late this document was signed.	/05/20:8	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable stanutory filing requirements, this date will not be Department of State's records.	= listed as the
(s) Amendment (s	(CHECK QNE)	
The amendment(s) was/were as by the shaveltolders was/were to	dopted by the shareholders. The number of votes cost for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the omendment(s):	
The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
-	(voting group)	
The amendmens(s) was/were a action was not required.	idopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a petion was not required.	dopted by the incorporators without shareholder action and shareholder	
09/05/20 Dated	018	
Signature		
selec	editector president or other officer - if directors or officers have not been eted, by an incorporator - if in the hands of a receiver, trustee, or other count opinion fiduciary by that fiduciary)	
	JOEL VEGA TORRES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	