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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ation: <u>Bernau</u>	1 Trucking	& Delivery:	INC
DOCUMENT NUMB	ER: P1800004	17531		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Ramo	n Reyes		
	Ramon 1	n Reyes Name of Contact Person Reyes P. A	n -	_
_	5035 Palm	Firm/ Company Ave		_
-	Hraleah	Address Honda,	33012	_
	E-mail address: (to be us	City/ State and Zip Cod Ting 5035 (a sed for future annual report) yahoo com	
For further information	concerning this matter, pleas	se call:		
Ram	on Reyes	at (305		,
Name o	f Contact Person	Area Co	de & Daytime Telephone Numb	er
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 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			Address Iment Section	

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Bernal Trucking	& Del.	ivery :	INC		
(Name of Corporat	ion as currently f	filed with the Florid	a Dept. of <u>State</u>)		
P18000047	<u>59/</u> wood Number of C	Corporation (if known			
(Docum	ment number of C	zorporation (11 known	1)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Fl	orida Profit Corpora	tion adopts the fe	ollowing amend	lment(s) to
A. If amending name, enter the new name of the c	orporation:				
**************************************					iew
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	$ ho,$ " "In $\dot{c},$ " or "Co	o". A professional c			
B. Enter new principal office address, if applicable					_
(Principal office address <u>MUST BE A STREET AD</u>	DRESS)				_
				201	,
					-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	() (V)			5 []	
(maining dual to MATE BE AT OUT OF TICE DA	2.10			<i>∴</i>	
		**************************************		<u> </u>	
D. If amending the registered agent and/or registenew registered agent and/or the new registered		ss in Florida, enter t	he name of the	. 9	
Name of New Registered Agent					
	(Florida street	t address)			
New Registered Office Address:			. Florida		
rest the state of	(C	ity)	, 1 10/10/10	(Zip Code)	_
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent: I am familiar wit	th and accept the obli	gations of the po	sition.	
		•	·· • • •		
					
Sigi	nature of New Reg	gistered Agent, if chai	nging		

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	<u>PT</u>	John Doc	
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	<u>√</u> ?	Yerandi Bernal Rednoso	18 hamplighter LN Vero Beach.
Add			Vero Beach.
X Remove			Florida 32960
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

	or adding additional A ional sheets, if necessary	e). (Be specific)			
					. =
		•	•	•	
		···			
				•	,
f an amendi	ment provides for an e	xchange, reclassific	ation, or cancellat	ion of issued share	·S.
provisions f	for implementing the a	mendment if not co	ntained in the ame	ndment itself:	
(if not a	pplicable, indicate N/A)	•			
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

The date of each amendment(s) adoption:	$\frac{29}{20/9}$, if other than the
date this document was signed.	,
Effective date <u>if applicable</u> : 04/29/ <i>301</i> 9	
(ho more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the app document's effective date on the Department of State's records.	icable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. To by the shareholders was/were sufficient for approval.	ne number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/w	ere sufficient for approval
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of director action was not required.	s without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators wit action was not required.	thout shareholder action and shareholder
Dated 04/29/2019	
Signature (By a director, president ovolunc of	icer if directors or afficers have not been
	he hands of a receiver, trustee, or other court
Jorge	Bernal
(Typed or printed)	I name of person signing)
Presi	dent
(Title	e of person signing)