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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ĉi	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: N&Y TRI	JCKS CORP	
DOCUMENT NUMBER:	P18000	0054792	
The enclosed Articles of Art	nendment and fee are su	hmitted for filing.	
Please return all correspond	ence concerning this ma	tter to the following:	
	ì	OELKY PRECIADO VA	LDES
	···········	Name of Contact Person	n
		N&Y TRUCKS CORE	•
		Firm/ Company	
		18647 NW 78TH PLAC	E
	<u> </u>	Address	
		HIALEAH, FL 33015	
	-	City/ State and Zip Cod	e
	กงุษา	ucks18@gmail.com	
		sed for future annual report	notification)
For further information con-	cerning this matter, pleas	se call:	
NOELKY PRE	CIADO VALDES	972 at (684-1629
Name of Co	ntact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment 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 a		-	Address
	ent Section		Iment Section
Division of Corporations			on of Corporations
P.O. Box			n Building Executive Center Circle
Tallahassee, FL 32314		2001 1	Accurre Comer Chere

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

N&Y TRUCKS CORP

(Name of Cor	poration as currently filed with the Fl	orida Dept. of State)
	P18000054792	
(Document Number of Corporation (if kn	lown)
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Cor	poration adopts the following amendment(s) to
A. If amending name, enter the new name of	f the corporation:	The new
name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co". A profession	r "incorporated" or the abbreviation
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFF)</u>		
D. If amending the registered agent and/or in new registered agent and/or the new reging Name of New Registered Agent		LDES
	(Florida street address)	
New Registered Office Address:	HIALEAH	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a	ng Registered Agent: agent. I am familiar with and accept the	obligations of the position.
<u> </u>	Signature of New Registered Agent, if	changing NO
	Page 1 of 4	

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: XChange	<u>PT</u>	John Doc	
X Remove	<u>V</u>	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	P	YANET ALEMAN VALEDON	18647 NW 78TH PLACE
Add			HIALEAH, FL 33015
X Remove			
2) Change	Р	NOELKY PRECIADO VALDES	18647 NW 78TH PLACE
X Add			HIALEAH, FL 33015
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			·
Remove			

famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
<u> </u>		
		<u> </u>
		
<u> </u>		
-		
		
		
		
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shar	es,
provisions for implementing the ame	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		· · · · · · · · · · · · · · · · · · ·
		-
		. <u> </u>
		<u>.</u>

	10/30/2018	
The date of each amendment(s) add	ption:	, if other than the
date this document was signed.	10/30/2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendmen icient for approval.	t(s)
	oved by the shareholders through voting groups. The following states ach voting group entitled to vote separately on the amendment(s):	ment
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action and sharehol	der
The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	
Dated	10/30/2018	
isited	af	
Signature	BAG	
	ector, president or other officer - if directors or officers have not bee	
	by an incorporator – if in the hands of a receiver, trustee, or other edd fiduciary by that fiduciary)	AUT.
	•	
_	YANET ALEMAN VALEDON	····
	(Typed or printed name of person signing)	
	PRESIDENT	
_	(Title of person signing)	