

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H220002759273)))



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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: INFOODOOUT CONSERVICES.COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN TRUE BLUE SYSTEMS INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

of 8/16/2022

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COVER LETTER

TO: Amendment Sec Division of Corp					
NAME OF CORPO	RATION: TRUE BLUE SYS	TEMS INC			
DOCUMENT NUM					
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	ARIEL VEGA				
		Name of Contact Perso	ກ		
	TRUE BLUE SYSTEMS IN	С			
		Firm/ Company			
1809 BRICKELL AVE APT 1013					
		Address			
	MIAMI, FL 33129				
		City/ State and Zip Cox	le		
	INFO@ALCARRIERSERVI	ICES.COM			
	E-mail address: (to be us	ed for future annual repor	t notification)		
For further information	n concerning this matter, pleas	se call:			
ARIEL VEGA		at (497-2444		
Name	of Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Dep	partment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amen Divisi The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

Articles of Amendment Articles of Incorporation

2022 AUS 15 AHTH: 54

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t Corporation adopts the following amendment(s) t The new "incorporated" or the abbreviation "Corp.,"
t Corporation adopts the following amendment(s) t
t Corporation adopts the following amendment(s) t
The new
"incorporated" or the abbreviation "Corp."
l corporation name must contain the word
36 ST # 814
L 33142
36 ST # 814
. 33142
a, enter the name of the
<u> </u>
, Florida
(Zip Code)

Example:

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.

X Change	PT	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	ARIEL VEGA	1392 NW 36 ST # 814
X Add			MIAMI FL 33142
Remove			
2) Change	MGR	ABEL LEANDRO VEGA	1392 NW 36 ST # 814
X Add			MIAMI FL 33142
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

resident become service within at Helled (1/ F).	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
,	(be specific)					
f an amandment provides for an exch	ange, reclassification, or cancellation of issued shares,					
nrovisions for implementing the enter	dment if not contained in the amendment itself:					
(if not applicable, indicate N/A)						
(if not applicable, indicate N/A)						
(if not applicable, indicate N/A)						
(if not applicable, indicate N/A)						
(if not applicable, indicate N/A)						
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(if not applicable, indicate N/A)						
(if not applicable, indicate N/A)						

08/15/2022	
	_ if other than the
date this document was signed.	
08/15/2022 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Os/15/2022 Dated Signature (By a director, president or other officer – if directors or officers have not been selected, by an incomporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) ABEL VEGA (Typed or printed name of person signing) MGR	-
(Title of person signing)	
(harren mbm. D)	