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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: RM Truck Service Inc. DOCUMENT NUMBER: P 18000057015
bocoment nomber. (SOO(O)) 1015
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Raquel M Feria Name of Contact Person RM Truck Service Inc Firm/Company
20260 SW 132 Ave Address
Miami FL 33177 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Raquel M. Feria at (786) 818 -2314 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, Fl. 32314

FILED

Articles of Amendment to Articles of Incorporation 2018 SEP 14 AM 8: 01

SECRETARY OF STATE

_	of		TALLAHA	SSEF. FI
RM Truck Service	ce Îr	n (°		
(Name of Corporation a		ed with th	e Florida Dept. of Sta	nte)
P 1800005	57015			
	Number of Co	rporation (ifknown)	
Pursuant to the provisions of section 607.1006, Florida Statists Articles of Incorporation:	atutes, this <i>Flo</i>	rida Profit	Corporation adopts the	e following amendment(s)
A. If amending name, enter the new name of the corpo	oration:			
n /a				The new
name must be distinguishable and contain the word "a "Corp.," "Inc.," or Co.," or the designation "Corp," ", word "chartered," "professional association," or the abbi	Inc," or "Co"	. A profes	" or "incorporated" ssional corporation na	or the abbreviation ame must contain the
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u>	<u>(SS</u>)		nfa	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	- - -		n/a	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		in Florida.	enter the name of th	<u>e</u>
	<u> </u>	.0		
Name of New Registered Agent	<u> </u>	ν_{L}	<u> </u>	
	(EL			
	(Florida street a	aaress)		
New Registered Office Address:	(Cit	,0	, Flo ri da	(Zip Code)
	,	,		(D) Comp
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		and accept	the obligations of the	position.
Signature	e of New Regis	tered Agan	t 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 <math>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.

Francia	, ana sai	iy smun, sv as an naa.		
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 Add Remove	V	Miguel	Brito-Mendoza	<u> 20260 SW 132 A</u> ve <u>Міаші</u> FL 33173
2) Change Add				
Remove 3) Change Add				
Remove 4) Change Add			······································	
Remove 5) Change Add				
Remove 6) Change Add Remove		·		

tach <i>additional sheets</i> ,	additional Articles, e , if necessary). (Be s	specific)	 -		
					
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in amendment provid	les for an exchange.	reclassification	or cancellation	of issued share	
in amendment provide rovisions for impleme	nting the amendmen	t if not containe	d in the amend	ment itself:	<u> </u>
(if not applicable, in	rdicate N/A) /				
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The date of each amendment(s) adoption:	h/a	, if other than the
date this document was signed.	in / 0	
Effective date if applicable:	no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not a document's effective date on the Department of Sta		requirements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app		t for the amendment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gre	nareholders through voting groups. coup entitled to vote separately on th	The following statement e amendment(s):
"The number of votes east for the amenda	_	
by	group)	"
☐ The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder	action and shareholder
The amendment(s) was/were adopted by the inc action was not required.	corporators without shareholder actic	n and shareholder
Dated 9 10 18 Signature Regret		
Signature Rollington Provide	ent or other officer – if directors or o	Olicurs have not been
selected, by an incorpo	orator – if in the hands of a receiver,	trustee, or other court
appointed fiduciary by	y that fiduciary)	
Ro	aque 1 / Fer. pped or printed name of person signi	<u>.</u>
(Ty		
	President	
	(Title of person signing)	