## P18000063409

| (Re                     | equestor's Name)   | <del></del> |
|-------------------------|--------------------|-------------|
| (Ac                     | idress)            |             |
| (Ac                     | ldress)            |             |
| (Ci                     | ty/State/Zip/Phone | : #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bı                     | usiness Entity Nam | ne)         |
| (Dx                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | of Status   |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEETT LORIDA

AUG 1 4 2013

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## **COVER LETTER**

**TO**: Amendment Section Division of Corporations

| NAME OF CORPOR           | ATION:  | ervices, Inc.  |  |
|--------------------------|---|--|--|
| DOCUMENT NUME            | ER:   |  |  |
|                          | of Amendment and fee are su   | bmitted for filing.  |  |
| Please return all corres | pondence concerning this ma   | tter to the following:   |  |
|                          | Jonathan Trejo Herandez   |  |  |
|                          |   | Name of Contact Person   | 1  |
|                          | JTH Hauling & Services, In  | nc.  |  |
|                          | **-   | Firm/ Company  |  |
|                          | 1460 Young Ave.   |  |  |
|                          |   | Address  |  |
|                          | Clearwater, Fl 33756  |  |  |
|                          |   | City/ State and Zip Code   | <u> </u>   |
| wand                     | ajenkinstrejo@gmail.com   |  |  |
| <u></u>                  | E-mail address: (to be us   | sed for future annual report                                       | notification)  |
| For further information  | concerning this matter, pleas   | se call:   |  |
| Jonathan Trejo Herr      | andez   | 727<br>at (  |  |
| Name c                   | f Contact Person  | Area Co  | )de & 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) |
| Ame<br>Divi.<br>P.O.     | ling Address Indment Section Ission of Corporations Box 6327 Ishassee, FL 32314 | Amend<br>Divisie<br>Clifton  | Address Iment Section on of Corporations Building xecutive Center Circle               |

Tallahassee, FL 32301



August 1, 2018

JONATHAN TREJO HERNANDEZ 1460 YOUNG AVE CLEARWATER, FL 33756

SUBJECT: JTH HAULING & SERVICES, INC.

Ref. Number: P18000063409

We have received your document for JTH HAULING & SERVICES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

On the adoption of amendment check only one box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 118A00015851

TO AUG 13 PM 4:2

(A)

## Articles of Amendment to Articles of Incorporation of



JTH Hauling & Services, Inc.

| (Name of Corporat  | tion as currently filed with the Florida Dept. of Control US 13 P & - 18                 |
|--|--|
| P18000063409   | SECRE MARIT OF STATE ment Number of Corporation (if known) FALLAHASSEL ORIDA             |
| (Docu  | ment Number of Corporation (if known) [ALLAHASSEL of LONDA                               |
| Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:                       | la Statutes, this Florida Profit Corporation adopts the following amendment(s) t         |
| A. If amending name, enter the new name of the c   | orporation:  |
|  | The new ord "corporation," "company," or "incorporated" or the abbreviation              |
| "Corp.," "Inc.," or Co.," or the designation "Corp<br>word "chartered," "professional association," or the | o," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A." |
| B. Enter new principal office address, if applicable   |  |
| (Principal office address <u>MUST BE A STREET AD</u>   | <u>DRESS</u> )   |
|  |  |
| C. Enter new mailing address, if applicable:<br>(Mailing address MAY BE A POST OFFICE BO                   | avi  |
| (Mutting address SIAT BE A FOST OFFICE B)  |  |
|  |  |
| D. If amending the registered agent and/or registe   | ered office address in Florida, enter the name of the                                    |
| new registered agent and/or the new registered   |  |
| Name of New Registered Agent   |  |
|  |  |
|  | (Florida street address)   |
| New Registered Office Address:   | , Florida  |
| New Registered Office Address:   | (Florida street address), Florida (City) (Zip Code)                                      |
| New Registered Agent's Signature, if changing Re   | gistered Agent   |
|  | I am familiar with and accept the obligations of the position.                           |
|  |  |
|  |  |
| Sigr   | nature of New Registered 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. SV as an Add.

| X Change                      | <u>PT</u>    | John Doc                 |                      |
|-------------------------------|--------------|--------------------------|----------------------|
| X Remove                      | <u>V</u>     | Mike Jones               |                      |
| X Add                         | <u>sv</u>    | Sally Smith              |                      |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>              | <u>Addres</u> s      |
| 1) Change                     | PTD          | Jonathan Trejo Hernandez | 1460 Young Ave       |
| X Add                         |              |                          | Clearwater, FI 33756 |
| Remove                        |              |                          |                      |
| 2) Change                     |              |                          |                      |
| Add                           |              |                          | <del>-</del> -       |
| Remove                        |              |                          |                      |
| 3 ) Change                    |              |                          |                      |
| Add                           |              |                          | <del></del>          |
| Remove                        |              |                          |                      |
| 4) Change                     |              |                          |                      |
| Add                           |              |                          |                      |
| Remove                        |              |                          |                      |
| 5) Change                     |              |                          | <u> </u>             |
| Add                           |              |                          | ·                    |
| Remove                        |              |                          |                      |
|                               |              |                          |                      |
| 6) Change                     |              | _                        |                      |
| Add                           |              |                          |                      |
| Remove                        |              |                          |                      |

| If amending or adding additional Arti<br>(Attach additional sheets, if necessary). | (Be specific)  |
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| If an amendment provides for an exch   | nange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame<br>(if not applicable, indicate N/A)           | endment if not contained in the amendment itself:          |
|  |  |
|  |  |
|  |  |
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|  |  |
|  |  |

|   | 7/26/2018   |                |
|---|---|----------------|
| The date of each amendment(s) a date this document was signed.        | doption:,   | if other than  |
| 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 statutory filing requirements, this date will no epartment of State's records.                             | t be listed as |
| Adortion of Amendment(s)  | ( <u>CHECK ONE</u> )  |                |
| ne amendment(s) was/were ad<br>by the shareholders was/were s         | opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.  |                |
|   | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): |                |
| "The number of votes cas  | t for the amendment(s) was/were sufficient for approval   |                |
| by  | (voting group)  |                |
|   | (voting group)  |                |
| action was not required.  | lopted by the board of directors without shareholder action and shareholder   |                |
| The amendment(s) was/were ad action was not required.                 | opted by the incorporators without shareholder action and shareholder   |                |
| 7/26/2018   | 3   |                |
| DatedSignature  |   |                |
|   | director, president or other officer – if directors or officers have not been   |                |
|   | ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)                             |                |
| •   | Jonthan Trejo   |                |
|   | (Typed or printed name of person signing)   |                |
|   | President   |                |
|   | (Title of person signing)   |                |

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