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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: A.Y.N TRU	CKING INC			
DOCUMENT NUME	BER: _P18000066789				
The enclosed Articles	of Amendment and fee are st	ubmitted for filing.			
Please return all corres	spondence concerning this ma	atter to the following:			
		V4444 41			
	<u>. </u>	YAIMA ALMARA Name of Contact Perso			
	£1.15	TX CARRIER SER			
			TICES INC		
		Firm/ Company			
	4201 W DR MART		G JR BLVD STE D		
		Address			
		TAMPA FL 3361	14		
		City/ State and Zip Cod	le		
	V	almarales@istarexpress	com		
	E-mail address: (to be u	sed for future annual report	notification)		
	n concerning this matter, plea	se call:at (、 805-8572		
Name of 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:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street Address			
	ndment Section sion of Corporations	Amendment Section			
	Box 6327	Division of Corporations Clifton Building			
	hassee, FL 32314	2661 Executive Center Circle			
		Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

A.Y.N. TRUCKING INC

A.T.N. I RUCKING	INC .
(Name of Corporation as currently filed with the Flor	rida Dept. of State)
P18000066789	
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flaits</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	3840 WHURPHREY ST
(Principal office address MUST BE A STREET ADDRESS)	THIPPA FL 33614.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Stree to AMOULE 500 500 500 500 500 500 500 500 500 50
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	E. Service State of the service of t
Name of New Registered Agent ANGEL LEON	
3840 W HUMPHREY (Florida street	
New Registered Office Address: TAMPA (City)	Florida 33614 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with XX Signature of the registered Age	h and accept the obligations of the position. ent, 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.

Example: X Change	<u>PT</u> <u>Joh</u>	n Dog	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	MERCEDES IZQUIERDO	7503 W ELLICOT ST
Add			TAMPA FL 33615
_ X _ Remove			
2) Change	_ P	ANGEL LEON	3840 W HUMPTHREY ST
X Add			THICPA A 33614.
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		 	
Add			
Remove			
6) Change			
Add			
Remove			

ttach <i>aa</i>	lditional shee	g additional Ar ts, if necessary).	(Be specif	ic)			
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<u>rovisio</u>	ns for impler	vides for an exc menting the am , indicate N/A)	change, recla	ssification, o ot contained	r cancellation in the amend	of issued shar ment itself:	es.
<u> </u>						 -	
							
_							

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated06/07/2019	
Signature XX	
(By a director, president or other officer - if directors or officers have not been	_
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
MERCEDES IZQUIERDO	
(Typed or printed name of person signing)	
P	
(Title of person signing)	<u> </u>