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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filina Officer:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: C H TRUCK PARTS INC				
DOCUMENT NUMBER: P18000069796				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:		
	CRISTINA BLANCO			
	Name of Contact Person			
	Firm/ Company			
	3725 WEST FLAGLER STREET #178			
	Address			
	CORAL GABLES FL 33134			4
		City/ State and Zip Code		©> (⊴)
CH1	RUCKPARTS@YAHOO.CO	M		(A)
	E-mail address: (to be us	sed for future annual report		<sub>ປ່າ</sub>
For further informatic	on concerning this matter, pleas	se call:	•	PX 2: 0
CRISTIAN BLANC	0	at (	•	-
Name	Name of Contact Person Area Code & Daytime Telephone Number		de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department 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)	
Am Div P.C	iling Address endment Section vision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

CH Truck Pa	xts Inc.		
(Name of Corpora	ation as currently filed with the Florida Dept. of State)		
17180000000	26		
(Doc	ument Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006. Flori its Articles of Incorporation:	ida Statutes, this Florida Profit Corporation adopts the followin	g amen	dment(s) to
A. If amending name, enter the new name of the	corporation:		
		The	หอาก
	ord "corporation," "company," or "incorporated" or the a rp," "Inc," or "Co". A professional corporation name must the abbreviation "P.A."	_ bbrevia	tion
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET AL			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	BOX)	S- 433 81	PARTON OF THE PA
		- P.H.	10 20 21 20 20 21 20 23 21
D. If amending the registered agent and/or registered agent and/or the new registered	tered office address in Florida, enter the name of the ed office address:	<u>)</u>	
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·	-	7
	(Florida street address)	-	
New Registered Office Address:	, Florida		
		Code)	_
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	degistered Agent:  I am familiar with and accept the obligations of the position.		
Si	anature 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	CARRIE HORTON	
Add			<del> </del>
X Remove			<del></del>
2) Change		CRISTINA BLANCO	
Add			
Remove			
3 ) Change			
Add			
Remove			
A) Channa			
4) Change			<del> </del>
Add Remove			
5) Change			
Add		_	
Remove			
6) Change			
Add			
Remove			

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

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file	
(no more than 90 days after amendment file	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame	
"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 action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
08/24/2018 Dated	
Signature Cralina Polanos	
(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
CRISTINA BLANCO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	• • • • • • • • •