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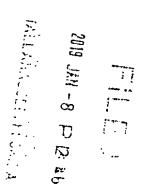
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Certified Copies	_ Certificate:	s of Status
Special Instructions to I	Filing Officer:	
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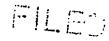


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JOE RU 5 TRUCK	ING INC	
DOCUMENT NUMB	ER: P18000075482		
	of Amendment and fee are su	hmitted for filing.	
Please return all corres	pondence concerning this ma	iter to the following:	
	JOEL A RUBIO		
-		Name of Contact Persor	1
-		Firm/ Company	<u> </u>
	451 W SHADY SIDE CIRCI	LE	
-	-	Address	
	WEST PALM BEACH, FL 3	3415	
-		City/ State and Zip Code	<u> </u>
JOEL	IANISJOJY@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se cali: at (at	248-2956
Name o	f Contact Person	at (Area Co	de & Daytime Telephone Number
	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□S43.75 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)
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Cliftor 2661 F	Address Iment Section on of Corporations of Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



JOE RU 5 TRUCKING INC (Name of Corporation as currently filed with the Florida Dept. of State) P18000075482 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: JOE RU 5 ENTERPRISE INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered of fice address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damoua			

•). (Be specific)	
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<u> </u>		
· · · · · · · · · · · · · · · · · · ·	xchange, reclassification, or cancellation of issued shares,	
provisions for implementing the an	mendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		-

The date of each amendment(s) :	idoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(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 wisepartment of State's records.	II not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote suparately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were acaetion was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	14/19.	
Signature &		
العبدة) select	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 tiduciary)	
	JOEL A RUBIO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	