P18000090949

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: BALKAN TRUCK	KING INC.	
DOCUMENT NUN	IBER: P18000090949		
	es of Amendment and fee are su	ibinitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	MIHAILO DRAGUTINOVI	IC	
		Name of Contact Person	n
	BALKAN TRUCKING, INC	2.	
		Firm/ Company	
	522 NE 1ST AVE, APT#3		
		Address	
	FT LAUDERDALE, FL 333	01	
		City/ State and Zip Cod	e
DR	AGUST8@YAHOO.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
MIHAILO DRAGUTINOVIC		at (207) 210-8069 de & Daytime Telephone Number
Nam	e 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:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

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2018 HOV		-	U
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BALKAN TRUCKING, INC.

DALKAN TROCKING, INC.		$_{\perp}$ SF $_{\ell}$.	
(Name o	of Corporation as currently	y filed with the Florida Dept. of	(State) 85
P18000090949			MSS. E. Ertely E
	(Document Number of	Corporation (if known)	1101
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this a	Florida Profit Corporation adop	ts the following amendment(s)
A. If amending name, enter the new na	me of the corporation:		
BALKAN TRUCKING, INC.			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associal	ation "Corp," "Inc," or "C	Co". A professional corporatio	
B. Enter new principal office address, i	if applicable:	522 NE 1ST AVE	
Principal office address MUST BE A STREET ADDRESS)		APT#3	
		FT LAUDERDALE, FL 3330)1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		522 NE 1ST AVE	<u>. </u>
		APT#3	
		FT LAUDERDALE, FL 3330)1
D. If amending the registered agent an new registered agent and/or the new			of the
Name of New Registered Agent	MIHAILO DRAGUTINO	VIC	
	522 NE 1ST AVE, APT#3		
	(Florida stre	eet address)	
New Registered Office Address:	FT LAUDERDALE	, FI	lorida 33301
		(City)	(Zip Code)

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.

X Change	PT Jo	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>sv</u> <u>sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PT	MIHAILO DRAGUTINOVIC	522 NE 1ST AVE
Add			APT#3
Remove			FT LAUDERDALE, FL 33301
2) X Change	V	MIHAILO DRAGUTINOVIC	522 NE 1ST AVE
Add			APT#3
Remove			FT LAUDERDALE, FL 33301
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The state of the s	icles, enter change(s) here: (Be specific)
	-
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f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a date this document was signed.	doption:	_, if other than the
Effective date <u>if applicable</u> :		
<u> </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 will repartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted 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)	
	Houng groups	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder	
11/06/201	8	
DatedSignature	hily Dryckmus	
(By a 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 need fiduciary by that fiduciary)	_
	MIHAILO DRAGUTINOVIC	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	