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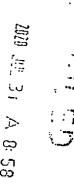
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COVER LETTER

TO: Amendment Section

Division of Corporations	•
NAME OF CORPORATION: DOCUMENT NUMBER:	Gerry King Trucking Fuc P18000100880
The enclosed Articles of Amendme	ent and fee are submitted for filing.
Please return all correspondence co	ncerning this matter to the following:
E-mail:	Name of Contact Person Serry King Franchof Tro Firm/ Company 62 Enclave Dr. 60 Address Winter Haven Fl. 33884 City/ State and Zip Code Florida hand @ Yahoo. Com address: (to be used for future annual report notification)
For further information concerning	this matter, please call:
Gerry KINY Name of Contact Pe	at (863) 514-539/ Area Code & Daytime Telephone Number
Enclosed is a check for the following	ng amount made payable to the Florida Department of State:
	75 Filing Fee & Substitute Status Sertified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sect Division of Corpo P.O. Box 6327 Tallahassee, FL 3	ion Amendment Section orations Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation

Gerry	King True	of TAKE		
(Name o	f Corporation as curre	otly filed with the Florida De	ept. of State)	
<u>(, , , , , , , , , , , , , , , , , , , </u>		2100880		
	(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation	adopts the following am	endment(s) to
A. If amending name, enter the new na	me of the corporation:			
Gerry King Tr name must be distinguishable and contain	ansport I	NC.	The	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation	I" or the abbreviation "C name must contain the	Corp.," word
B. Enter new principal office address, i (Principal office address MUST BE A S)		_ <i>N</i> /A		
			7970	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	w ·	
			→ 	
D. If amending the registered agent an			<u>ن</u>	
new registered agent and/or the new	N/A	<u>-51:</u>		
Name of New Registered Agent				
	(Eto-ido	street address)		
	Λ//A	street address)		
New Registered Office Address:		(City)	, Florida(Zip Code)	
			-	
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	nanging Registered Age ered agent. I am familia	ent: or with and accept the obligation	ons of the position.	
N/A				
	Signature of New	v Registered Agent, if changing	<u></u>	
Check if applicable The amendment(s) is/are being filed put	ursuant to s. 607.0120 (1	1) (e), F.S.		

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		_N/A	_
Add			
Remove			
2) Change			
Add			<u> </u>
Remove 3) Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

NA	sneets, if necessary). (Be specific)			
NIH	, ,				
<u></u>				<u></u>	
					
				<u>-</u>	<u>.</u>
					-
			······································		
		·			
					
					<u> </u>
If an amendment	provides for an ex	change, reclassificat	ion, or cancellation o	f issued shares,	
provisions for in	nplementing the an	change, reclassificat rendment if not cont	tion, or cancellation o tained in the amendn	f issued shares, ent itself:	
provisions for in (if not applic	provides for an examplementing the amendal indicate N/A)	change, reclassificat nendment if not cont	ion, or cancellation o tained in the amendn	f issued shares, ent itself:	
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provisions for in (if not applic	nplementing the an	change, reclassificat	ion, or cancellation o	f issued shares, ent itself:	

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The date of each amendment(s) adoption:	, if other than
date this document was signed.	- 21	
Effective date if applicable:	7.31-20	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	te will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(e sufficient for approval.	s)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	7-31-20	
Signature	Herry King	
sele	a director, president or other officer – if ti) ectors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other cour ointed fiduciary by that fiduciary)	1
	(Typed or printed name of person signing)	1.00
	Owner/Pres.	
	(Title of person signing)	

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