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2019 HAY 20 PH 4: 59

C. GOLDEN

JUN - 7 2019

## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: KATALINA TRUCKING INC DOCUMENT NUMBER: P19000007004 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JESSICA M INDA Name of Contact Person KATALINA TRUCKING INC Firm/ Company 221 N KANSAS ST SUITE 700 Address EL PASO, TX 79901 City/ State and Zip Code KATALINATRUCKING@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: . JESSICA M INDA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is

enclosed)

# Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

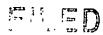
### Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy

is enclosed)

# Articles of Amendment to Articles of Incorporation of



KATALINA TRUCKING INC

2019 HAY 20 PM 4:59

(Name of Corporation as currently	filed with the Florida Dept. of State)
P1900007004	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
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 addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida str	vet address)
N. D. C. LOW. Advance	. Fłorida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	i with and accept the obligations of the position.
Signature of New R	egistered Agent, if changing

address of each Office (Attach additional shee Please note the officer, P = President; V= Vic Executive Officer; CF held, President, Treast Changes should be not a change, Mike Jones	er and/or I ets, if neces /director tit ce Presiden O = Chief arer, Direct ted in the fa leaves the c	Director being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Dire Financial Officer. If an officer/director or would be PTD. ollowing manner. Currently, John Doe is	each officer/director being removed and title, name, and vetor; TR= Trustee; C = Chairman or Clerk; CEO = Chic holds more than one title, list the first letter of each office listed as the PST and Mike Jones is listed as the V. There and S. These should be noted as John Doe, PT as a Change
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	BRIAN SHANE SALAZAR	4466 W 17TH ST
X _ Add			YUMA, AZ 85364
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<u></u>
5) Change			
Add			
Remove			
6) Change			
Add			

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				a of isenad char	\c.	
an amendment p	rovides for an exci	nange, reclassification endment if not conta	inud in the amon	dment itself:	-3,	
orovisions for im	plementing the ame ble, indicate N/A)	nament ii not conta	med in the amen	differentiacir.		
(і) ної арриса	me, marcate (v/A)					
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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 date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wil document's effective date on the Department of State's records.	I 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 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 east for the amendment(s) was/were sufficient for approval	
by	
(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.	
05/14/2019 Dated	
Signature (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)	
JESSICA M INDA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	