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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AB ALL SERVICES INC

Account Number : I20200000155 Phone : (305)882-1238 Fax Number : (305)882-1260

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN JLADK TRUCK CORP

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NOV 12 2020

COYER LETTER

Division of Cor				
NAME OF CORPO	PRATION: JLADK TRUCK (CÓRP	·	
	IBER: P19000008770			
The enclosed Article	s of Amendment and fee are st	ibmitted for filing.		
Please return all corr	espondence concerning this me	atter to the following:		
	ELIZABETH FLEITAS			
		Name of Contact Perso	on	
	AB ALL SERVICES INC			
		Firm/ Company		
	1100 WEST 29ST			
		Address		
	HIALEAH, FL 33012			
		Cityi State and Zip Coo	le	
	AB1100@YAHOO.COM			
	E-mail address: (to be u	sed for future annual repor	t notification)	
For further information	on concerning this matter, plea	sc call:		
ELIZABETH FLEIT	`AS	at (305) 882-1238 ode & Daytime Telephone Number	
Name	of Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Dep	partment of State:	
□ \$35 Filing Fcc	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S\$2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
	nendment Section	Amendment Section		
	vision of Corporations D. Box 6327		on of Corporations Centre of Tallahassee	
	lahassec, FL 32314		N. Monroe Street, Suite 810	
	•		assec, FL 32303	

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida Dept. of State)		
P19000008770			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, l'Iorida Statutes, this Fits Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing an	nendment(s
A. If amending name, enter the new name of the corporation;			
		The	e new
name must he distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered." "professional association." or the abbreviation "P.A."	ompany," or "incorporated" or the abhi professional corporation name must	eviation "(contain th	Corp.," = word
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>)			
		•	
	·		
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	<u></u>
		<u> /</u>	0 1 A0N 030
			<u>*</u>
). If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the		0 1
new registered agent and/or the new registered office address:			発行
Name of New Registered Agent	<u></u>		
		٠	23
(Florida stree	et address)		Ç
(*			
New Registered Office Address:	City) Floride_		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

X.Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	PABLO ARISTIZABAL CORDOBA	1800 SW 52 AVE
Add			PLANTATION, FL 33317
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Κεπιανο			
6) Change			
Add			
Remove			

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orovisions lor in	provides for an exc notementing the am able, indicate N/A)	:hange, reclassif endment if not c	cation, or cancell outgined in the a	stion of issued sha mendment itself:	ires,	
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			-m-			

The date of each amendme date this document was sign	, if other than t
Effective date if applicable	
	(no more than 90 days after amendment file date)
Note: If the date inserted in document's effective date on	this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/w action was not required.	e adopted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/w by the shareholders was/v	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
☐ The amendment(s) was/wi inust he separately provide	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
	cast for the amendment(a) was/were sufficient for approval
	(voting group)
Signature T	1/2 1/2
8	ected, by an incorporator - if in the hands of a receiver, trustee, or other count pointed fiduciary by that fiduciary)
	LEO RODRIGUEZ LA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)