## P190000 11449

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(C	ity/State/Zip/Phone #	F)
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: KELLEM TRUCKING INC DOCUMENT NUMBER: P19000011449 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RACHESHIA BRADLEY Name of Contact Person KELLEM TRUCKING INC Firm/ Company 4700 HIATUS ROAD 255 Address SUNRISE/FL/33351 City/ State and Zip Code KELLEMTRUCKS@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RACHESHIA BRADLEY at (954) 882-5124

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & S35 Filing Fee **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of



2019 HEY 21 PM 1-53

to

KELLEM TRUCKING INC		10171191 21 EU 4-33
(Name	of Corporation as currently filed	with the Florida Dept. of State
P19000011449		War Eur
·····	(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Florid</i>	da Profit Corporation adopts the following amendment
A. If amending name, enter the new n	ame of the corporation:	
		The new
	nation "Corp," "Inc," or "Co".	company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
). If amending the registered agent at		Florida, enter the name of the
new registered agent and/or the ne	w registered office address:	
Name of New Registered Agent	RACHESHIA BRADLEY	
	4700 HIATUS ROAD 255	
	(Florida street ada	Iress)
New Registered Office Address:	SUNRISE	. Florida
New Registered Office Nutreas.	(City)	, Fiorida (Zip Code)
New Registered Agent's Signature, if o		
thereby accept the appointment as regis	tered agent. I am familiar with an	nd accept the obligations of the position.
	Simulation D. Chi.	
	Signature of New Register	rea rigent, 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	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>	Address
1) Change	P	AAVIER SHEPPARD	4700 HIATUS ROAD 255
Add			SUNRISE, FL, 33351
X Remove			
2) Change	P	RACHESHIA BRADLEY	4700 HIATUS ROAD 255
XAdd			SUNRISE, FL, 33351
Remove			
3) Change			
Add			
Remove			
4) Change			<del></del>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Domova			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
remove AAVIER SHEPPARD as President add RACHESHIA BRADLEY as President				
remove AAVIER SHEPPARD as registered agent add RACHESHIA BRADLEY as registered agent				
remove AAVIER SHEPPARD from articles add RACHESHIA BRADLEY to articles				
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:				
(if not applicable, indicate N/A)				

3/19/2019	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
3/19/2019	
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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
<ul> <li>The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder was not required.</li> <li>The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action and shareholder.</li> </ul>	
action was not required.	
3/19/2019 Dated	
Signature	
(By a director, president or other officer - fi directors or officers havened	
selected, by an incorporator - if in the hands of a receiver, trustee, or other	ner court
appointed fiduciary by that fiduciary)	
RACHESHIA BRADLEY	
(Typed or printed name of person signing)	
P Well do At	<del></del>
(Title of person signing)	