

7/15/2021

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H21000272275 3)))



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## To:

Division of Corporations  
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Account Name : FASTKIT CORP  
Account Number : I20100000009  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
UNBREAKABLE TRUCKING CORP**

Certificate of Status	0
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JUL 19 2021

S. PRATHER

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July 16, 2021

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

UNBREAKABLE TRUCKING CORP  
6731 GREENE ST  
HOLLYWOOD, FL 33024US

SUBJECT: UNBREAKABLE TRUCKING CORP  
REF: P19000016175

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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Valerie Herring  
Regulatory Specialist III

FAX Aud. #: H21000272275  
Letter Number: 721A00016403

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02522

P.O BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment  
to  
Articles of Incorporation  
of  
UNBREAKABLE  
TRUCKING CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000016175

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:

*(Principal office address MUST BE A STREET ADDRESS)*

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

*(Florida street address)*

*(City)*

*, Florida*

*(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*

2021 JUL 16 AM 9:11  
CLIFF  
DEPT OF STATE  
TALLAHASSEE, FLORIDA

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	ALEJANDRA CASTILLO	6731 GREENE ST HOLLYWOOD, FLORIDA 33024	<input type="checkbox"/> Add. XX Remove

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

AMENDING OFFICERS, REMOVING ALEJANDRA CASTILLO AS A VP

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)

The date of each amendment(s) adoption: 07/13/2021

(date of adoption is required)

Effective date if applicable:

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

III 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.

X I=1 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):

I. The number of votes cast for the amendment(s) was/were sufficient for approval

by

(voting group)

III The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

IV The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 07/13/2021

Signature



(8. I am: s resident or other officer if directors or officers have not been  
select I Incorporator -- if in the hands of a receiver, trustee, or other court  
appointed fiduciary by that fiduciary)

RIGOBERTO J. CASTILLO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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CLERK OF THE  
STATE  
TALLAHASSEE, FLORIDA

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