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May 09 2019

COVER LETTER

Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/Company City/ State and Zip Code E-mail address: (to be used for fusure annual report notification) For further information concerning this matter, please call: 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: S35 Filing Fee □\$52.50 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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

Articles of Amendment

to

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Artic	cles of Incorp	oration		
No Modter W	Not -	TRUC	ks C	0905
(Name of Corporation as	s currently fil	ed with the Florida	Dept. of State)	
Y1900002gg	10)			•
(Document)	Number of Co	rporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statists Articles of Incorporation:	tutes, this Flor	ida Profit Corporat	ion adopts the foll	owing amendment(s
A. If amending name, enter the new name of the corpor	ration:			
				The new
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	Inc," or "Co"	. A professional co		
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>33</u>)			n.i'
	=			
	-			<u> </u>
C. Enter new mailing address, if applicable:				1
(Mailing address MAY BE A POST OFFICE BOX)				9
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D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent		in Florida, enter th	e name of the	
 ,	(Florida street a	ddroes		
,	(F torma sirvet a	auressy		
New Registered Office Address:			, Florida	
	(Cit	<i>s</i>)		(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent: 1 familiar with	and accept the oblig	ations of the posit	tion.
Signature	e of New Regis	tered Agent, if chan	ging	

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	<u> </u>					
X Add	<u>sv</u>	Sally Smith	1					
Type of Action (Check One)	<u>Title</u>	<u>N:</u>	<u>ame</u>		<u>Addres</u> s			
1) Change	DCE iresiden		Jatha	mielBo	ds 23	30 N	W635+	A
Add	• -				<u> </u>	tMI+		/
2) Change								
Add								
Remove								
3) Change								
Add								
Remove								
4) Change								
Add								
Remove						<u> </u>		
5) Change	-		-					
Add								
Remove								
6) Change								
Add						. <u> </u>		
Remove								

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)	
provisions for implementing the amendment if not contained in the amendment itself:	
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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:	, if other than the
fate 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 we document's effective date on the Department of State's records.	vill 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 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 cast 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.	
Dated 4-12-2019	Z
Signature	5
(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)	
Nathaniel Brook S	
(Typed or printed name of person signing)	
P.C.E. O President	
(Title of person signing)	