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(((H190001468163)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : THREE K FAST CARRIER SERVICES INC

Account Number : I20180000033

Phone : (305)805-3516 Fax Number

: (305)887-5844

\*\*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 DEGLON

## MARIO & ANE TRUCKING INC Certificate of Status Certified Copy Page Count 06 Estimated Charge \$35.00

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MAY 10 2019

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May 3, 2019

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MARIO & ANE TRUCKING INC 1749 SW 7TH STREET HOMESTEAD, FL 33030

SUBJECT: MARIO & ANE TRUCKING INC

REP: P19000030795

ReFaxed 5/8/19

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.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

YOU MAY CHECK ONLY ONE BOX UNDER SECTION "ADOPTION OF AMENDMENT(S)" ON PAGE 4 OF 4 OF THE DOCUMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245~6050.

Carlene Connell FAX Aud. #: B19000146816 Regulatory Specialist II Supervisor Letter Number: 119A00008960 (H190001468163)

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MARIO & ANE	TRUCKING INC	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are:	submitted for filing.	
Picase return all corres	spondence concerning this m	natter to the following:	
	MARIO E IZQUIERDO		
		Name of Contact Perso	on
	MARIO & ANE TRUCKIN		
		Firm/ Company	
	1749 SW 7TH STREET		
		Address	
·	HOMESTEAD, FL 33030		
		City/ State and Zip Coo	de
•			
	E-mail address: (to be u	sed for future annual report	notification)
_			· · · · · · · · · · · · · · · · · · ·
For further information	concerning this matter, piea	se call:	
MARIO E IZQUIERDO	o O	363	262 1225
Name of	Contact Person	at (	de & Daytime Telephone Number
		Area Co	de & Daytime Telephone Number
merosed is a circul (O)	the following amount made	payable to the Florida Depa	irtment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 assee, FL 32314	Ainendi Divisio Clifton	Address ment Section n of Corporations Building tecutive Center Circle

Tallahasses, FL 32301

## Articles of Amendment to Articles of Incorporation of



(Name of Corneration as guera	who file I was a first of the file of the
P19000030795	ntly filed with the Florida Dept. of State)
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
N/A	
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	Iress in Florida, enter the name of the
Name of New Registered Agent N/A	A 1 8
(Florida st	reet adáress)
New Registered Office Address:	(City) , Florida (City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent tereby accept the appointment as registered agent. I am familiar to	<u>:</u> with and accept the obligations of the position.
Signature of New R	egistered Agant, if changing

4-190801468163

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 = ChiefExecutive 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 Doe	
X Remove	$\overline{\Lambda}$	Mike Iones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PRES	MARIO E IZQUIERDO	•
Add X Remove 2) Change	PRES	Last Name Adianes Tang Hernandez	
Z Change X Add		A TANO HERNANDEZ	1749 SW 7711 ST
Add			HOMESTEAD, FL 33030
3) Change	SEC	MARIO E. IZQUIERDO	1749 SW 7TH ST
X Add			HOMESTEAD, FL 33030
Remove			19 MAY SECRETA
4) Change			
Add			
Change			18   Rain
Add			
Remove			
) Change			
Add			
Remove			

	(41900014	/ KI 1
E. If amending or adding additional Articles, enter change(s) here:	(111/000/4	631
(Attach additional sheets, if necessary). (Be specific)	•	
N/A		
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	3> =-	<b>₹</b> 7
	SS.	
If an amendment provides for an exchange, reclassification, or cancellation of issu-	ied shares (11	0
provisions for implementing the amendment if not contained in the amendment is (if not applicable, indicate N/A)	tself:	للا م
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The date of each amendment(s) adoption this document was signed.	5-1-2019 ption:				0/468, if other than the
5-1-20 Effective date <u>if applicable</u> :				·	
	(no more than 91) days after	omendment file date)			
Note: If the date inserted in this bloc document's effective date on the Depar	k does not man the a-ti-it.	ory filing requirements, this	s date w	vill not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of cient for approval.	votes east for the amendme	int(s)		
The amendment(s) was/were approving the separately provided for each	red by the shareholders through voting the voting group entitled to vote separate	groups. The following state ely on the amendment(s):	enicnt		
"The number of votes east for	the amendment(s) was/were sufficient i	for approval			
by	(voting group)	94			
	(voting group)	·			
	d by the board of directors without shar		ida ç	19	
The amendment(s) was/were adopted action was not required.	I by the incorporators without sharehold	der action and shareholder	UKL FAR JAHASS	HAY -9	<u> </u>
5-1-2019 Dated				PM	ŢŢŢ
Signature (X) N	<u> </u>		OF STAT	2: 1	0
	or, president or other officer - if directe an incorporator - if in the hands of a re duciary by that fiduciary)	ors or officers have not been ecciver, trustee, or other co	Dr. P urt	<del>-</del> 😄	
ADI	ANES TANG HERNANDEZ				
·	(Typed or printed name of perso	n signing)			
PRE	SIDENT				
<del></del>	(Title of person signi				