## P19000034146

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Amend

AUG 0 7 2019

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: TRUJO TRUCK C	ORPORATION		
DOCUMENT NUM	BER:	<u>.</u>		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	ERNESTO B. TRUJILLO			
	PB	Name of Contact Person	1	
		Firm/ Company		
	8810 FONTAINEBLEAU BI	JVD APT.211		
		Address		
	MIAMI, FL 33172			
		City/ State and Zip Code		
		0.14		
LAF	FITA.TRUJILLO@GMAIL.C	ed for future annual report	notification)	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
ERNESTO B.TRUJILLO		at ( <u>786</u>	399 - 8603	
Name of Contact Person		Arca Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Address 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		
Tahanassee, r.C. 32301				

## Articles of Amendment to Articles of Incorporation of



## TRUJO TRUCK CORPORATION

(Name of Corporation as curren	itly filed with the Florida Dept. of State)	
P19000034146	<u></u>	
(Document Number	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) t	
A. If amending name, enter the new name of the corporation:		
N/A	The new	
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	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	6490 SW 130 AVE	
(Principal office address MUST BE A STREET ADDRESS)	APT.1602	
	MIAMI FLORIDA 33183	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6490 SW 130 AVE	
	APT.1602	
	MIAMI FLORIDA, 33183	
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	ddress in Florida, enter the name of the	
N/A Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ar with and accept the obligations of the position.	
Signature of Nev	w Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 offic 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 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) N/A Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	-		
Add Remove			
Keniove			<del></del>

Attach additional sheets, if necessary). (Be specific)		
N/A		
	_	
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)		
N/A		

• • •	07/30/2019	if other than th
The date of each amendment(s) a date this document was signed.	idoption:	, if other than to
	30/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date bepartment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were as by the shareholders was/were:	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
07/30/20	19	
Dated	100	
Signature	Joseph	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	ERNESTO B.TRUJILLO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	