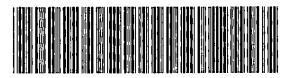
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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

* Tallahassee, FL 32314

NAME OF CORPORATION: RBECFER TRUCKING CORP
DOCUMENT NUMBER: <u>P1900039325</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Robert Becfer
Name of Contact Person
Rbecfer Trucking Corp
Firm/ Company
1921 SW 17 Ct
Address
<u>Mami, FL 33135</u>
City/ State and Zip Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Datout Bocker 786 1370-6351
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Incorporation of

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
P19000039375		
(Document Number	r of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s)	
. If amending name, enter the new name of the corporation:		
A/N	The new	
ame must be distinguishable and contain the word "corporate Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or cord "chartered," "professional association," or the abbreviation	r "Co". A professional corporation name must contain the	
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	AIN	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
 If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address. 		
Name of New Registered Agent N	<u> </u>	
ıFlorida.	street address)	
New Registered Office Address:	(City) , Florida (Zip Code)	
iew Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familia		
Signature of New	v Registered Agent, if changing	

ddress of each Office Attach additional shee lease note the officert = President; V= Vic xecutive Officer; CFO eld. President, Treast 'hanges should be not change, Mike Jones of fike Jones, V as Remo	er and/or Units, if neces, if neces, if neces, if neces, if e. Presiden O = Chief arer, Direct and in the followers the contents.	Director being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Direct Financial Officer. If an officer/director he for would be PTD. Ollowing manner - Currently John Doe is li	tor: TR = Trustee: C = Chairman or Clerk: CEO = Chief olds more than one title, list the first letter of each office sted as the PST and Mike Jones is listed as the V. There is d S. These should be noted as John Doc, PT as a Change,
xample: X Change	PT	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
ype of Action Check One)	Title	<u>Name</u>	<u>Addres</u> s
) <u>X</u> Change	P	Robert Becfet	#> F1 we 15 PT
Add			Hiami, FL 33145
Remove			
) Change		_	
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Remove			
Change			
Add			
Remove			
l) Change			
Add			
Remove			
5) Change			
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5) Change			
Add			
Remove			

$N \setminus \lambda$
. 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)
$\mathcal{N} / \mathcal{L}$

he date of each amendment(s) adoption:	11/12/19	, if other than the
ate this document was signed.		
ffective date if applicable:		
	(no more than 90 days after amendment file date)	
ote: If the date inserted in this block does is ocument's effective date on the Department of	not meet the applicable statutory filing requirements, this f State's records.	date will not be listed as the
doption of Amendment(s) (CI	IECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the amendme approval.	ent(s)
The amendment(s) was/were approved by the must be separately provided for each voting	ne shareholders through voting groups. The following state group entitled to vote separately on the amendment(s):	ement
"The number of votes east for the ame	endment(s) was/were sufficient for approval	
by	oting group)	
, (Va	oung group)	
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	older
The amendment(s) was/were adopted by the	incorporators without shareholder action and shareholder	г
action was not required.		
Dated 11/12/2	019	
Dated	2	
Signature		
(By a director, pre	sident or other officer – If directors or officers have not be corporator – if in the hands of a receiver, trustee, or other	court
	y by that fiduciary)	
1	Cobert Becker (Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

11/12/19

_____, if other than the