P19000057478

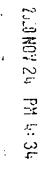
(Rec	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: RIVES RIVES TR	UCKING INC		
DOCUMENT NU	JMBER: P19000057478			
	cles of Amendment and fee are su	ibmitted for filing.		
Please return all co	orrespondence concerning this ma	itter to the following:		
	SERRANO, FRANCISCA			
		Name of Contact Persor	1	
	RIVES RIVES TRUCKING INC			
		Firm/ Company		
	272 6TH ST SE			
		Address		
	NAPLES, FL 34117			
		City/ State and Zip Code	2	
	rivesrivestruckinginc@gmail	.com		
	E-mail address: (to be us	sed for future annual report	notification)	
For further inform SERRANO, FRA	ation concerning this matter, pleas		, 8601681	
Name of Contact Person		ar (Area Coo		
Enclosed is a chee	k for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	2 □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

RIVES RIVES TRUCKING INC

RIVES RIVES TRUCKING INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P19000057478	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendatis Articles of Incorporation:	nent(s) t
A. If amending name, enter the new name of the corporation:	
The ne	
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 wo "chartered," "professional association," or the abbreviation "P.A."	," rd
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)	
1 1-0	
	_
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	
	V 20
(Florida street address)	
(Florida street address)	
New Registered Office Address:, Florida	-
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	
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	
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

\underline{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>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Yunier Curbelo Rives	272 6TH ST SE
X Add			NAPLES, FL 34117
Remove			
2) Change	_		
Add			
Remove 3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

	adding additional Art il sheets, if necessary).	(Be specific)			
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		_	-		
	nt provides for an excl	hange, reclassificati	ion, or cancellation	of issued shares,	
f an amendmen		endment if not cont	ained in the amend	ment itself:	
provisions for i	implementing the ame				
provisions for i	implementing the ame icable, indicate N/A)				
provisions for i	implementing the ame icable, indicate N/A)				
provisions for i	implementing the ame icable, indicate N/A)				
provisions for i	implementing the ame icable, indicate N/A)				
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provisions for i	implementing the ame				

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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors wit action was not required.	hout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes case by the shareholders was/were sufficient for approval.	st for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on th	
"The number of votes cast for the amendment(s) was/were sufficient for appro-	oval
by(voting group)	"
Signature (By a director, president of other officer – if directors or of selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary) SERRANO, FRANCISCA (Typed or printed name of person significance)	trustee, or other court
President	

(Title of person signing)