# PZ0 000004032

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(Address)
(Address)
(1.00.00)
(City/State/Zip/Phone #)
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(Document Number)
(Coouncil Name)
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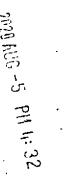
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### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: KYJ TRUCK SER	VICES INC	<del></del>
	BER: P20000004032		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Julio Piedra		
		Name of Contact Persor	1
		Firm/ Company	<del></del>
	23040 JUMPER AVE		
	· · · ·	Address	
	PORT CHARLOTTE, FL 33	952	
		City/ State and Zip Code	2
	AILIN@MONAGAACCOU	NTING.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
JULIO PIEDRA		at (239	259-7483
Name (	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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 Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section In of Corporations Centre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation

#### KYJ TRUCK SERVICES INC

#### (Name of Corporation as currently filed with the Florida Dept. of State)

P20000004032

. If amending name, enter the new name of the corpo	oration:	
		The ne
ime must be distinguishable and contain the word "corpo lnc.," or Co.," or the designation "Corp," "Inc," of chartered," "professional association," or the abbrevia	r "Co". A professional corpora	
Enter new principal office address, if applicable:		دع
rincipal office address <u>MUST BE A STREET ADDRE</u>	ESS )	29 /
		<u></u>
	<del></del>	<u>1</u>
Enter new mailing address, if applicable:		70
(Mailing address MAY BE A POST OFFICE BOX)		PH
		<del>".</del> ധ
	~	
. 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 offi		
new registered agent and/or the new registered offi  Name of New Registered Agent	ice address:	
new registered agent and/or the new registered offi  Name of New Registered Agent	ice address:	
new registered agent and/or the new registered offi  Name of New Registered Agent	ice address: (Florida street address)	
new registered agent and/or the new registered offi  Name of New Registered Agent	ice address:	
new registered agent and/or the new registered offi  Name of New Registered Agent	ice address: (Florida street address)	
new registered agent and/or the new registered offi  Name of New Registered Agent  New Registered Office Address:  ew Registered Agent's Signature, if changing Registered	ice address:  (Florida street address)  (City)	, Florida (Zip Code)
new registered agent and/or the new registered offi  Name of New Registered Agent  New Registered Office Address:  ew Registered Agent's Signature, if changing Registered	ice address:  (Florida street address)  (City)	, Florida (Zip Code)
new registered agent and/or the new registered offi  Name of New Registered Agent  New Registered Office Address:  ew Registered Agent's Signature, if changing Registered	ice address:  (Florida street address)  (City)	, Florida (Zip Code)
Name of New Registered Agent	ice address:  (Florida street address)  (City)	, Florida (Zip Code)

#### Check if applicable

 $\Box$  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: X_Change	b.L.	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>	Address
1) Change	P	PIEDRA, JULIO	23040 JUMPER AVE
Add			PORT CHARLOTTE, FL 33952
X Remove			
2) Change	P	MENDEROS RUIS, ADRIAN	7525 ALUMINUM RD
X Add			NORTH FORT MYERS, FL 33903
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	-		
Add			*******
Remove			
6) Change			
Add			41-10-1-1-10-1-10-1
Remove			

	nal sheets, if nece.	ssary). (Be spe	ecific)			
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	ent provides for	an exchange, re	classification, or	cancellation of i	ssued shares,	
If an amendm		Manument Manument	n not contamed	in the amendme	n usen:	
provisions fo	plicable, indicate	197.H.)				
provisions fo	plicable, indicate	187A)				
provisions fo	plicable, indicate		<del></del>			
provisions fo	plicable, indicate		<del></del>			
provisions fo	plicable, indicate					
provisions fo	plicable, indicate					
provisions fo	plicable, indicate	IV(A)				
provisions fo	plicable, indicate	IN/A)				
provisions fo	plicable, indicate					
provisions fo	plicable, indicate	IV(A)				

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JUNE 181°, 2020	
· · · · · · · · · · · · · · · · · · ·	_, if other than th
date this document was signed.	
JUNE 1ST , 2020	
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 will need document's effective date on the Department of State's records.	ot be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and slaction was not required.	hareholder
☐ 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)	
06/01/2020	
Dated	
Signature Judge	
(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)	
appointed inductary by that inductary)	
JULIO PIEDRA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	