P200000 25113

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R. WHOTE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KAROLTH TRUC	KING INC	
DOCUMENT NUMB			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	YULEIKYS IBARRA GO	NZALEZ	
•	_	Name of Contact Person	1
	KAROLTH TRUCKING	INC	
	· · · · · ·	Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	434 EAST 48TH ST		
		Address	<u> </u>
	HIALEAH, FL 33013		
		City/ State and Zip Code	2
	yulyamor88@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
YULEIKYS IBARRA	GONZALEZ	305	367-1576
Name of 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)
Ame Divi: P.O.	ling Address ndment Section sion of Corporations Box 6327 phassee, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

KAROLTH TRUCKING INC

NAROLIN IROCKING INC		<u> </u>		<u> </u>
(Name o	f Corporation as currently	filed with the Florida Dept. of Sta	te)	12: n5
P20000025113				
	(Document Number of	Corporation (if known)		
tursuant to the provisions of section 607.1 s Articles of Incorporation:	1006. Florida Statutes, this I	Florida Profit Corporation adopts th	e following an	nendment(s)
a. If amending name, enter the new na	ime of the corporation:			
V/A			au	
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,"	"orp," "Inc," or " $C\phi$ ". A	ompany," or "incorporated" or the o professional corporation name m	hhreviation "(e new Corp.," e word
r r	if analisable:	N/A		
B. Enter new principal office address, Principal office address MUST BE A ST	TREET ADDRESS)			
Enter new mailing address, if appli	cable:	N/A		
(Mailing address MAY BE A POST (OFFICE BOX			- -
				-
				
). If amending the registered agent an	d/or registered office add	ress in Florida, enter the name of the	<u>16</u>	
new registered agent and/or the new		<u>:</u>		
Name of New Registered Agent	N/A			
	Florida str	eet address)		
	N/A			
New Registered Office Address:		(City)	1a (Zip Code	·)
		(22.67)	(,
New Registered Agent's Signature, if c hereby accept the appointment as regist	hanging Registered Agent tered agent. I am familiar v	: with and accept the obligations of the	position.	
 	Signature of New R	egistered Agent, if changing		
	-			
Charle if annlicable				

☐ 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name.	<u>Addres</u> s
Change X Add			
Remove 2)Change	VP	ROLANDO LAZO ZUNIGA	275 SW 82 AVE
Add			MIAMI, FL. 33144
Remove 3) Change			
Add			
Remove 4) Change Add			
Remove 5) Change			
Add			
Remove 6)Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
'A	
	<u> </u>
-	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(i) in approximation into	
() 100 applicable, maletae (1011) /A	

	03/19/2020	_
The date of each amendment(s) add	option:	, if other than the
date this document was signed.	0/2020	
Effective date <u>if applicable</u> :	9/2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date artment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop action was not required.	sted by the incorporators, or board of directors without shareholder actio	n and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s ficient for approval.)
The amendment(s) was/were approvided for emust be separately provided for e	oved by the shareholders through voting groups. The following stateme, ach voting group entitled to vote separately on the amendment(s):	nı
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by N/A	···	
	(voting group)	
05/23/202	20	
Dated/\(\mathcal{V}\) Signature	HILL.	
(By a di selected	ector president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
	YULEIKYS IBARRA GONZALEZ	
-	(Typed or printed name of person signing)	
	P (PRESIDENT)	
-	(Title of person signing)	