Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : A & L CARRIER SERVICES INC.

Account Number : I20110000033

Phone

: (786)360-2879 : (786)362-5270

Fax Number **Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** Email Address: Info@alovvierservices.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN AYH TRUCKING INC

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HAY 15 2720

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AYH TRUCKIN	GINC
DOCUMENT NUMBER: P20000031209	
The enclosed Articles of Amendment and fee are s	•
Please return all correspondence concerning this m	natter to the following:
YOSVANI GARCIA GON	Zalez
	Name of Contact Person
AYH TRUCKING INC	rame of Contact Person
- ;	Firm/ Company
9811 W OKEECHOBEE RI	D APT 210
	Address
HIALEAH GARDENS FL	33016
	City/ State and Zip Code
INFO@ALCARRIERSERV	TCES.COM
E-mail address: (to be u	used for future annual report notification)
For further information concerning this matter, ples	ase call:
LIZ GONZALEZ	at (786) 360-2879
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	
\$35 Filing Fee \$Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) 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

AYH TRUCKING INC

ATTI TROCKING INC	<u> </u>
P20000031209	ion as currently filed with the Florida Dept. of State)
(Docur	ment Number of Corporation (if known)
	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:
AYG TRUCKING INC	
name must be distinguishable and contain the word "co". "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	<u>≅</u> DRESS)
~ `	
C. Enter new mailing address, if applicable: (Mailing address MAX BE A POST OFFICE BO) <i>X</i>)
D. If amending the registered agent and/or register new registered agent and/or the new registered	ed office address in Florida, enter the name of the
• • • •	ounce additess.
Name of New Registered Agent	
 	
	(Florida street address)
New Registered Office Address:	, Florida
•	(City) (Zip Code)
	E. C. 50
New Registered Agent's Signature, if changing Regi	stered Agent:
hereby accept the appointment as registered agent. I	I am familiar with and accept the obligations of the position
Signer	turn of New Product 1
	ture of New Registered Agent, if changing
Check if applicable	13
The amendment(s) is/are being filed pursuant to s. 60	07.0120 (11)·(e), F.S.

(Attach additional sheet: Please note the officer/d P = President; V = Vice Executive Officer; CFO President, Treasurer, Di Changes should be noted a change, Mike Jones let Mike Jones, V as Remove	s, if necessive tile in the control of the control	ssary) tle by the first letter of the offic tl; T= Treasurer; S= Secretary inancial Officer. If an officer/ ould be PTD. ollowing manner. Currently Jo corporation, Sally Smith is nan	e title: v; D= Director; TR= Tr director holds more than	ustee; C = Chairma one title, list the firs	in or Clerk; CEO = Chief i letter of each office held. is listed as the V. There is thn Doe, PT as a Change,
Example: X Change	PT	John Doe			2020 HAY SECAL I
X Remove	<u>v</u>	Mike Jones			AY 14
_X Add	<u>sv</u>	Sally Smith			in-
Type of Action (Check One)	Title	Name		Address	AH 10: 2
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Add					
Remove				·····	
2) Change		_ 			
Add					

Remove Change

____ Add

4) ____ Change

____ Add

5) ____ Change

____ Add

6) ____ Change

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___ Remove

Remove

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Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoption: date this document was signed.		if other	than the
05/14/2020 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 document's effective date on the Department of State's records.	te will no	t be liste	d as the
Adaption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	on and sha	reholder	
☐ 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.	i)		
The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	m 25.5	2020 HAY	
"The number of votes cast for the amendment(s) was/were sufficient for approval	ECRETART LL AHASSI	HAY	
ву	SSS	+	1
(voting group)	<u> </u>		1 .
05/14/2020 Dated	<u>। अस्त</u> १ ७२१५	£H 10: 24	
Signature (DS M) (DCc. (D) 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)			
YOSVANI GARCIA GUNZALEZ			
(Typed or printed name of person signing)			
PRESIDENT			
(Title of person signing)			