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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: YARY TRUCK RI	EPAIR SERVICE INC	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	C/O ANA L SAINZ		
		Name of Contact Persor	
	ANA L SAINZPA DBA RO	YAL PALMS ENTERPRIS	ES
		Firm/ Company	
	207-2 N MAIN AVE		
		Address	
	LAKE PLACID, FL. 33852		
		City/ State and Zip Code	•
	anasainzpa@gmail.com		
	. • -	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
ana I sainz		at ( <u>863</u>	441-0644
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
<b>\$35</b> Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

to

(Name of Corporation	n as currently filed with the	e Florida Dept. of State)	
YARY TRUCK REPAIR SERVICE INC			
(Docume	ent Number of Corporation (	if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit	Corporation adopts the following amend	ment(s
A. If amending name, enter the new name of the con	rporation:		
name must be distinguishable and contain the word "cor" "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional		o ''
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADD)			_
			_
	<del></del>		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>		-
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		, enter the name of the	-
Name of New Registered Agent		<del>.</del>	
	(Florida street address)		
New Registered Office Address:		Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I		the obligations of the position	
тистья иссерь не цуркничей из гезыстей адем.	um jumitur wan unu uccepe	ine orangunous of the position.	
	•		
Signat	ture of New Registered Agem	t, if changing	
Check if applicable			

 $\square$  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:

(Anach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ \widetilde{V} = Vice \ President; \ \widetilde{T} = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief$ 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	Title	<u>Name</u>	Address
(Check One)	VPD	JEANETTE SANCHEZ RODRIGUL	2375 N COCHRANE RD
1) Change X Add			AVON PARK, FL. 33825
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach add	ig or adding addition: litional sheets, if necess	al Articles, enter change sary). (Be specific)	<u>(S) nere</u> :		
	INFORMATION SAN		•		
				·	
			<del></del>	<del>-</del>	
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F. <u>If an amen</u>	dment provides for a	n exchange, reclassifica	tion, or cancellation	of issued shares,	
<u>provision:</u> (if not	s for implementing in applicable, indicate N	e amendment if not con VA)	tained in the ament	iment (tsen:	
N/A					
				•	
					<del></del>
					<u>-</u>
					···

• •		1/30/2021		, if other than the
The date of eac	h amendment(s) ado	ption:		II (Aller IIIII)
date this docume		31		
Effective date <u>i</u> f	2/1/20 Canalicable:			
Effective date in	паррисион.	(no more than 90	days after amendment file date)	
Note: If the dad document's effe	te inserted in this blo ctive date on the Dep	ck does not meet the applica artment of State's records.	ble statutory filing requirements, th	is date will not be listed as the
Adoption of Ar	nendment(s)	( <u>CHECK ONE</u> )		
☐ The amendm	nent(s) was/were adop ot required.	ted by the incorporators, or be	oard of directors without shareholde	r action and shareholder
The amendar by the share	nent(s) was/were adop holders was/were suf	ted by the shareholders. The ficient for approval.	number of votes cast for the amend	ment(s)
☐ The amendn	nent(s) was/were appr arately provided for e	oved by the shareholders thro ach voting group entitled to v	ugh voting groups. The following so tote separately on the amendment(s)	atement :
		or the amendment(s) was/wer		
pì. <sup>—</sup>		(voting group)		
	4/7/2021 Dated	/		
	<del></del>	A Company		
	selected	rector, president or other office, by an incorporator – if in the diduciary, by that fiduciary	cer - if directors or officers have not e hands of a receiver, trustee, or other	been er court
		RODRIGO YARABI GONZ	ALEZ RIOS	
		(Typed or printed	name of person signing)	
		PRESIDENT/DIRECTOR/S	ECRETARY	
		(Title of person si	gning)	