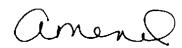
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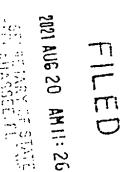
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AUG31 2021 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: L&D TRUCKING	SERVICES CORP			
DOCUMENT NUM	D20000066730				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	CARLOS SIRES				
		Name of Contact Perso	n		
	L&D TRUCKING SERVICES CORP				
		Firm/ Company			
	1313 BROWING AVE				
		Address			
	ORLANDO, FL 32809				
		City/ State and Zip Cod	le		
	CREW1823@YAHOO.COM	í			
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	n concerning this matter, plea				
Name	of Contact Person	Area Co	ide & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Dep	artment of State:		
S35 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			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
	ahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2021 AUG 20 AMII: 26

L&D TRUCKING SERVICES CORP

Check if applicable

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

P20000066739	THARSEF HE WAS
(Documen	n Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida St ts Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment
a. If amending name, enter the new name of the corp	oration:
	Thenew
	oration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word attion "P.A."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ESS</u>)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	
. If amending the registered agent and/or registered new registered agent and/or the new registered offi	
Name of New Registered Agent	
-	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I am	ered Agent: on familiar with and accept the obligations of the position
Sionatur	e of New Registered Agent, if changing

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)

Example:

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 Doc 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 Doc, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X.Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>Y</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	P	_	LUIS L FRUTO DE LA FUENTE	1313 BROWING AVE
X Add				ORLANDO, FL 132809
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				···
4) Change		_		
Add				
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5) Change		_		
Add				
Remove				
6) Change		_		
Add	_	_		
Remove				

Mttach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requirement partment of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharel	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the an officient for approval.	nendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	ng statement nt(s);
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
08/13/2021		
Dated	114	
Signature	\forall \(\forall \)	
(By a d	rector, president or other officer – if directors or officers have f, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	LUIS L FRUTO DE LA FUENTE	
	(Typed or printed name of person signing)	
	(Title of person signing)	