P20 000069634

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OCT 26 2020

COVER LETTER

Division of Corporations NAME OF CORPORATION: A-1 Quality Trucking Services Inc DOCUMENT NUMBER: P20000069634 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: A.J. Quality Trucking Services Inc For further information concerning this matter, please call: Dominique NewKirk
Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee **■**\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

(Name of Corporation as currently fi	
P2000069634	~
(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	深 呈 口
\mathcal{N}/A	The hew
name must be distinguishable and contain the word "corporation," "com "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A p. "chartered," "professional association," or the abbreviation "P.A."	pany," or "incorporated" or the abbreviation "Corp.," rofessional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent /V/	-
(Florida street	address)
	,
New Registered Office Address: (Ci	y) Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	
Signature of New Regi	stered Agent, if changing
Signature of ivew kegt.	sierea Agem, g chunging

Check if applicable

☐ 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)

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 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> 14</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u> P</u>	Andel E. Williams	
Add			Lakeland, FL 33805
Remove	. 🚗		
2) Change	<u> </u>	Arlene M. NewKirk	
Add			Lakeland, FL 3380
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding Attach additional sheet 	additional Articles, enter s, if necessary). (Be specif	<u>change(s) here</u> : fic)			
<i>V / / 1</i>	<u> </u>	·	. <u></u> -	····	
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<u>If an amendment pro</u>	ides for an exchange, recla	assification, or cancell	lation of issued shall	res,	
provisions for impler	nenting the amendment if	not contained in the a	<u>mendment itself:</u>		
(if not applicable,	indicate N/A)				
1///					
-		·			_
					
			.		

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The date of each amendment(s) adoption: <u>TUESDAY SEPTEMBER 15+h</u> , <u>HOJO</u> , if other than the date this document was signed.
Effective date if applicable: TUESDAY Se Ptember 15th, 2020 (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 not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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)
09-14-2020
Signature (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)
Dominique D. NewKirk (Typed or printed name of person signing)
CEO
(Title of person signing)