P20 000075390

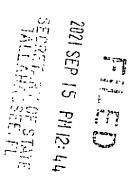
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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPOR.	ATION: WFE TRUCKING	G CORP	
DOCUMENT NUMBI	D 20000076200		
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
\	VILVER PEREZ GUEVAR	A	
_	<u></u>	Name of Contact Person	
\	VFE TRUCKING CORP		
		Firm/ Company	
2	835 52 ND AVE NE		
-	-	Address	
>	JAPLES FL 34120		
		City/ State and Zip Cod	
C	EIDYEVERFRAN@GMA	IL.COM	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
WILVER PEREZ GUE	VARA	786	816-6683
Name of	Contact Person	Area Co) 816-6683 de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisio P.O. B	ng Address Idment Section on of Corporations on 6327 assee, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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Check if applicable

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

FILED

WFE TRUCKING CORP	2021 SEP 15 PH 12: 44	
(Name of Corporation as currer	ntly filed with the Florida Dept. of State)	
P20000075390	- EGRIN OF STATE	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)	
A. <u>If amending name, enter the new name of the corporation:</u> N/A		
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	2835 52ND AVE NE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	NAPLES FL 34120	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2835 52ND AVE NE	
	NAPLES FL 34120	
	-	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.	dress in Florida, enter the name of the	
Name of New Registered Agent N/A		
	-	
(Florida s	treet address)	
New Registered Office Address: 2835 52ND AVE NE N	APLES Florida 34120	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	nt: with and accept the obligations of the position.	
(IRC)		
Signature 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)

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.

Example: XChange	<u>PT</u>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change			2835 52 ND AVE NE
Add			NAPLES FL 34120
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Ramava			

T. Tanen amaniform shel	ig additional Arti ets, if necessary).	(Be specific)			
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					<u>.</u>
If an amendment pro	ovid <u>es for</u> an exch	iange, reclassific	ation, or cancell	ation of issued sha	res,
provisions for imple	menting the ame	ndment if not co	ontained in the a	mendment itself:	
(if not applicable	2. maicate (NA)				
			<u>-</u>		
					_
 -				 .	<u> </u>
 					

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The date of each amendment(s) adoption:	if other than the
09/08/2021	
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shar action was not required.	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.	
☐ 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	
by (voting group)	
09/08/2021 Dated	
Signature WPD	
(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)	
WILVER PEREZ GUEVARA	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)