P20000076225

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<u>COVER_LETTER</u>

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: L & O LOAD SOL	UTUIONS INC	· · · · · · · · · · · · · · · · · · ·				
	BER: P20000076225	_					
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.					
Please return all corre	spondence concerning this ma	tter to the following:					
	LEIDY C LOPEZ						
	Name of Contact Person						
	L& O LOAD SOLUTION INC						
	Firm/ Company						
	7795 INDIAN RIDGE TRAIL	L NORTH					
	Address						
	KISSIMMEE FL 34747						
		City/ State and Zip Cod	8				
	RAPIDTAXFL@OUTLOOK	COM					
	E-mail address; (to be us	sed for future annual report	notification)				
	on concerning this matter, pleas						
LEIDY C LOPEZ		at (
Name	of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:				
■ \$35 Filing Fee	S43.75 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)				
Am Div P.C	niling Address nendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303				

Articles of Amendment to Articles of Incorporation of

L & O LOAD SOLUTION INC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	<u> </u>
P20000076225		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the fo	llowing amendment(s
A. If amending name, enter the new name of the corporation:		
LOPEZ LOAD SOLUTION INC		The new
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	reviation "Corp.," contain the word
3. Enter new principal office address, if applicable:		1821 Jáli
(Principal office address MUST BE A STREET ADDRESS)		;
		PH 1
C. Enter new mailing address, if applicable:		5.
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent		
(t forda)	street address)	
New Registered Office Address:	, Florida	(Zip Code)
	(Cu)/	(εφ ευαν
N. D. Carlotta and American State and a Decision of American		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia.		sition.
Signature of New	Registered Agent, if changing	
Check if applicable		

 \Box 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.

<u>PT</u>	John Doe	
V	Mike Jones	
<u>SV</u>	Sally Smith	
<u>Title</u>	<u>Name</u>	<u>Addres</u> s
VP	CHIRISTIAN C OROZCO	7795 INDIAN RIDGE TRAIL N
		KISSIMMEE FL 34747
		
		· · ·
		4-1
		· <u>-</u>
	<u>V</u> <u>SV</u> <u>Title</u>	V Mike Jones SV Sally Smith Title Name

E. <u>If ame</u> (Attacl	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
N/A	
-	
<u></u>	
·	
<u> </u>	
7. If an	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself:
prov	if not applicable, indicate N/A)
N/A	
	<u></u>

The date of each amendment(s) adoption:	other than the
date this document was signed.	
01/12/2024 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 will not b document's effective date on the Department of State's records.	e 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 shareholder action was not required.	holder
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	
(voting group)	
O1/12/2021 Dated (By a director, president drother 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)	
LEIDY C LOPEZ	
(Typed or printed name of person signing)	<u> </u>
PRESIDENT	

(Title of person signing)