P21 000005275

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COVER LETTER

TO: Amendment Section
Division of Corporations

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NAME OF CORP	ORATION: LIBERTY TRUCK	LING ENTERPRISE, INC			
DOCUMENT NU	MBER: P21000005275				
	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	tter to the following:			
	Wanda Plummer				
		Name of Contact Person	1		
	LIBERTY TRUCKING ENT	ERPRISE, INC			
		Firm/ Company			
	2338 MINDANAO DRIVE				
		Address			
	JACKSONVILLE, FL 32246				
	City/ State and Zip Code				
	libertytruckingent@gmail.co	orn			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	tion concerning this matter, pleas	se call:			
Wanda Plummer		at (⁹ 04) 534-1928 de & Daytime Telephone Number		
Narr	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Dep	artinent of State:		
\$35 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)		
A D P	lailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LIBERTY TRUCKING ENTERPRISE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)	
P21000005275	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amoits Articles of Incorporation:	endment(s) t
A. If amending name, enter the new name of the corporation:	
$Th_{\mathcal{O}}$	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "C "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A."	Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
7021 FE	1
)
(Mailing addrass MAV RE A POST OFFICE ROY)) D
(Mulling dualess MAT BE AT OST OTTICE BOX)	三55
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	5
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
Hume by Hew Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Chae)	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	
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)

Remove

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: X Change	PT John	Doe .	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>√a</u>	MICHAEL LAURIE	2338 MINDANAO DR
X Add			JACKSONVILLE, FL 32246
Remove			
2) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

	ding or adding additional sheets, if nece	ssary). (Be specif	îc)		
					
			 		
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	<u> </u>				
					
					
				<u>. </u>	
f an am provisie (if i	nendment provides for ons for implementing to not applicable, indicate	an exchange, reclamated in the amendment if no N/A)	ssification, or cance ot contained in the	ellation of issued st amendment itself:	nares,
					-
					

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ite this document was signed.	option:	, if other than th
ffactive date if applicable:	- 3-,21	
rective trace it appreciate.	(no more than 90 days after a	mendment file date)
ote: If the date inserted in this blo neument's effective date on the Dep		filing requirements, this date will not be listed as th
doption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	pted by the incorporators, or board of direct	tors without shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of verticient for approval.	otes east for the amendment(s)
must be separately provided for e	roved by the shareholders through voting greath voting group entitled to vote separately	ly on the amendment(s):
	for the amendment(s) was/were sufficient for	
by	(voting group)	·"
Dated	2-3-3- 2.5.5.0re Education of the officer - if directors	
Signature	Louve Elwan	20 1)
selected.	rector, president or other officer – if directo, by an incorporator – if in the hands of a reed fiduciary by that fiduciary)	ors or officers have not been eceiver, trustee, or other court
	(Typed or printed name of person	
_	(Transland an adular dames of access	
-	(1 yped of printed name of perso	on signing)
-	_	on signing)

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