## P21000005760

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: YMC MULTISER	VICES, INC		
DOCUMENT NUM	BER: P21000005760			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Yaima Almarales			
		Name of Contact Persor	1	
	Ultimate Trucking Services I	Firm/ Company		
	1008 Coconut Dr	· ······ CC····p·····y		
	Address			
	Tampa, FL 33619			
		City/ State and Zip Code	<u>e</u>	
	yalmaralesuts@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, plea	se call:		
Yaima Almarales		at ( <u>813</u>	420-0252	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 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)	
Mailing Address 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

YMC MULTISERVICES, INC			
( <u>Name (</u> P21000005760	of Corporation as current	tly filed with the Florida D	ept. of State)
F21000003760			
	(Document Number)	of Corporation (if known)	
Pursuant to the provisions of section 607, ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the following amendment(
A. If amending name, enter the new na	ame of the corporation:		
CRUZ MOVERS INC			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association,"	Corp, " "Inc, " or "Co".	A professional corporation	
B. Enter new principal office address,	if applicable:	n/a	
Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if appl	icahle:		
(Mailing address MAY BE A POST		n/a 	
			<del></del>
D. If amending the registered agent ar	nd/or registered office add	dress in Florida, enter the i	name of the
new registered agent and/or the new	w registered office addres	<u>ss:</u>	
Name of New Registered Agent	n/a		
	(Florida s	(reet address)	
View Province of Office Address			121 - 21.4
New Registered Office Address:	-	(City)	, Florida <i>(Zip Code)</i>
		·	·
New Registered Agent's Signature, if c			
hereby accept the appointment as regist	tered agent. I am familiar	with and accept the obligation	ions of the position.
			0.3
			2012
	Signature of New .	Registered Agent, if changin	2012 JUL 12
	•		man and the second seco
Check if applicable  ☐ The amendment(s) is/are being filed p	urspant to s. 607 0120 (11	Ve) ES	N A
interiories (i) some being theu p		/ X + // · · · · · ·	A CONTRACTOR

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; CE() = 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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	$\underline{V}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Su	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_	n/a	
Add				
Remove				<del></del>
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		<del>_</del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

. If amending or ac	dding additional Art sheets, if necessary).	icles, enter change	:(s) here:			
	sneets, y necessary).	(ве хресілс)				
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If an amendment	provides for an excl	nange, reclassifica	tion, or cancellat	tion of issued sha	res,	
provisions for in	nplementing the amo	endment if not cor	itained in the am	endment itself:		
(if not applic	able, indicate N/A)					
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		-,		<del></del>	<del> </del>	
<del></del>		· · · · · ·		,	<del> </del>	
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	n/a
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
n/a	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block docdocument's effective date on the Departmen	es not meet the applicable statutory filing requirements, this date will not be listed as that of State's records.
Adoption of Amendment(s)	CHECK ONE)
■ The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes east for the amendment(s) for approval.
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes east for the a	imendment(s) was/were sufficient for approval
by	
	(voting group)
7/8/2024 Dated	<del>/</del>
Signature	
(By a director,-p	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 fidue	iary by that fiduciary)
Yoel M	iguel Cruz
	(Typed or printed name of person signing)
Preside	nı
	(Title of person signing)

2012 JUL 12 AM II: 27