P21000013490

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SECRETARY OF STATE

A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RETTIZ SAENZ T	RUCKING INC	····
DOCUMENT NUM	P21000013490		
The enclosed Article	s of Amendment and fee are sul	bmitted for filing.	
Please return all corr	espondence concerning this mat	tter to the following:	
	MARIA A RETIZ		
		Name of Contact Person	1
		Firm/ Company	
	3800 NE 168TH STREET AI	PT 404	
		Address	
	NORTH MIAMI, FL 33160		
		City/ State and Zip Code	•
	MARA404@LIVE.COM		
	E-mail address: (to be us	ed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
MARIA A RETIZ		786	355 2807
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for 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		Amend	Address ment Section
			n of Corporations entre of Tallahassee
			N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

RETTIZ SAENZ TRUCKING INC

(Name of Corporation	on as currently filed with the Matical Decided Decided State 2: 28
P21000013490	A FRANKIS OF CIAIR
(Docum	nent Number of Corporation (if known) AHASSEE. FL
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	prporation:
	The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc,' "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD	
•	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
D. If amending the registered agent and/or register	red office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	(Cay)
New Registered Agent's Signature, if changing Reg	gistered Agent:
	l am familiar with and accept the obligations of the position.
Signo	ature 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)

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>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	MARIA A. RETIZ	3800 NE 168TH STREET #404
Add		(single "T")	NORTH MIAMI, FL 33160
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional s	ding additional Articles, enter heets, if necessary). (Be spec	cific)		
		- /		
				<u> </u>
				
		<u></u>		
				
				
				
				
<u></u>		·		
an amendment	provides for an exchange, rec	lassification, or can	cellation of issued s	hares,
rovisions for im	plementing the amendment if	not contained in ti	<u>ie amendment itself</u>	<u>t</u>
(if not applice	ble, indicate N/A)			
		<u></u>		
				
				-

•	03/10/2021	_
	The date of each amendment(s) adoption:, if other th	an th
	date this document was signed.	
	03/30/2021	
	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 be listed document's effective date on the Department of State's records.	as ti
	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 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 MARIA A. RETIZ	
	(voting group)	
	03/10/2021	
	Dated	
	Signature Maria Cetil	
	(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)	
	.,	
	MARIA A. RETIZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	