P21000029429

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COVER LETTER

TO: Amendment Section

Division of Corp	oorations		•			
NAME OF CORPO	RATION: HAULER TRUCK	PARTS INC.				
	BER: P21000029429					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	atter to the following:				
	NAVEED HANIF					
		Name of Contact Persor	1			
	ADVANTAGE ACCOUNTI	NG AND TAX LLC				
		Firm/ Company				
	2700 N MILITARY TRAIL,	SUITE 200				
		Address				
	BOCA RATON, FL 33431					
		City/ State and Zip Code				
	NAVEED@ADVANTAGE.CPA					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatic	on concerning this matter, plea	se call:				
NAVEED HANIF		at (687-6466			
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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
	iling Address		Address			
	endment Section ision of Corporations	Amendment Section Division of Corporations				
	. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

HADLER TRUCK PARTS INC.

(Name of Corporation as currently filed with the F	lorida Dept. of State			
21000029429		,		
(Document Number of Corporation (if k	(nown)			
resuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Co</i> Articles of Incorporation:	rporation adopts the f	ollowing	g amer	ndment(s
. If amending name, enter the new name of the corporation:				
			The	new
une must be distinguishable and contain the word "corporation," "company," or "inc inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional con- chartered," "professional association," or the abbreviation "P.A."			n "Co	rp., "
Enter new principal office address, if applicable:				
rincipal office address <u>MUST BE A STREET ADDRESS</u>)				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
	-			
				
If amending the registered agent and/or registered office address in Florida, er	iter the name of the			
new registered agent and/or the new registered office address:				
Name of New Registered Agent)	
			٠- ي	
(Florida street address)	_	;-	٠.,	
The management			N)	
New Registered Office Address: (City)	, Florida_	·		
(Спу)		(ZID C	ougi	نر
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		<u> </u>	\supset	
w Registered Agent's Signature, if changing Registered Agent:			1,7	
creby accept the appointment as registered agent.—I am familiar with and accept the	e obligations of the po	sition.		
Signature of New Registered Agent, if	Changing			
each if anyther blo				
neck 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)

Example:

Please note the officer/director title by the first letter of the office title:

 $P = President; \ \hat{V} = Vice\ President; \ \hat{T} = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	$\overline{\mathbf{bL}}$	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	VP	ABDULLAH CHEEMA	14430 NW 11TH STREET
Add			PEMBROKE PINES, FL 33028
Remove			
2) X Change	OFF	JOSE ANTONIO DIAZ	18306 NW 6TH ST
Add			PEMBROKE PINES, FL 33029
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach <i>additional</i>	dding additional Arti sheets, if necessary).	(Be specific)				
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	 ,					
	 -					 _
lf an amendment	provides for an exch	ange, reclassificati	on or cancellatio	on of issued share	• C.	
provisions for in	provides for an exch nplementing the ame	ndment if not conta	ained in the ame	ndment itself:		
(if not applic	able, indicate N/A)					
		<u>-</u>				
						
<u> </u>						
						- - -

	04/21/2021	
The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
04/21/2	021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(ni) more than 90 days tifter amenament file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirement timent of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes east for the american for approval.	endment(s)
	yed by the shareholders through voting groups. The following the voting group entitled to vote separately on the amendment	
"The number of votes east for	the amendment(s) was/were sufficient for approval	
by	,,,,	
,	tvoting group)	
04/21/2021 Dated	— 	
Signature (D)	in Mandor helma tor, president or other officer - if directors or officers have a	
	y an incorporator – if in the hands of a receiver, trustee, or of	
	fiduciary by that fiduciary)	The court
	CANDER CHEEMA	
_	(Typed or printed name of person signing)	-
PR	ESIDENT	
_	(Title of person signing)	······································