P21000070488

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name)	
(Docu	ıment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fi	ling Officer:	
	J. HORNE	İ
	AUG 19 2022	

Office Use Only



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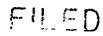
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MAH TRUCKING	AND SONS INC	
DOCUMENT NUMB	ER: P21000070488	· 	<u>.</u>
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corres	oondence concerning this ma	tter to the following:	
i	MARJORIE WHITTON		
-	. ·	Name of Contact Person	1
	MAH TRUCKING AND SO	NS INC	
_		Firm/ Company	
	14885 SW 174 COURT		
-		Address	· · · · · · · · · · · · · · · · · · ·
	INDIANTOWN FL 34956		
-		City/ State and Zip Cod	e
-	WHITTON.MARJORIE@Y	AHOO.COM sed for future annual report	polification)
	E-mail address, (to be da	sed for raidic aminar report	TRAITICE TO THE TENT OF THE TE
For further information	concerning this matter, pleas	se call:	
MARJORIE WHITTO	N	at (772	v 320-8323
	f Contact Person		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)
Ame Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassec, FL 32314	Amend 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



9

MAH TRUCKING AND SONS INC

2022 JUN -6 AM 11: 45

(Name of Corporatio	on as currently filed with the Florida Dept. of State) CRETARY OF STATE
P21000070488	TALLAHASSEE, FL
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the con	rporation:
	The new rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "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 <u>MAY BE A POST OFFICE BOX</u>	<u>X</u>)
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	i <mark>stered Agent:</mark> I am familiar with and accept the obligations of the position.
Signa	ture of New Registered Agent, if changing
Check if applicable	

 \square 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add	-		
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here</u> : (Attach additional sheets, if necessary). (Be specific)
AMENDNG FOR CORRECT EIN NUMBER 87-2016248
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this bedocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder ac	ction and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment fficient for approval.	nt(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	rment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	···	
	(voting group)	
Dated	24/2022	
Signature XZL	Whitfon	
selected	rector, president or other officer – if directors or officers have not bee I, by an incorporator – if in the hands of a receiver, trustee, or other co ed fiduciary by that fiduciary)	
	Marjorie Whitton	
	(Typed or printed name of person signing)	
	(Title of person signing)	