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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Bejerano Trucking	of SWFL INC	
	BER: P21000076207		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Javier Martinez Bejerano		
	Name of Contact Person		
		Firm/ Company	
	4354 18th PL SW		
		Address	· · · - ·
	Naples, FL 34116		
		City/ State and Zip Code	
	bejerano2180@jicloud.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Javier Bejerano		239 at (4046615
Name of Contact Person Area Code & Daytime Telephone !		de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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

Bejerano Trucking of SWFL Inc			
(Name of Corporation as curre	ntly filed with the Florida Dep	t. of State)	_
P21000076207			
(Document Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation ad	dopts the following amendment(s	s) to
A. If amending name, enter the new name of the corporation:			
		The new	
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	A professional corporation n	or the abbreviation "Corp.,"	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
(Francipal Office maness <u>my31 DLA STREET ADDRESS</u>)		21 21	
		!\	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			į
		12:	j
	-		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr		me of the	
Name of New Registered Agent			
(Florida	street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Age	ent·		
I hereby accept the appointment as registered agent. I am familia		s of the position.	

Signature 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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Javier Lazaro Bejerano Martinez	4364 18th PL SW
Add			Naples, FL 34116
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			_
Add			-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
PLEASE UPDATE ADDRESS OF PRESIDENT TO 4364 18TH PL SW IN NAPLES, FL 34116.
FIRST NAME: JAVIER
MIDDLE NAME: LAZARO
LAST NAME: MARTINEZ BEJERANO
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) adoptio	n:	, it other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amend	dment file date)
Note: If the date inserted in this block d document's effective date on the Department.		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted b action was not required.	y the incorporators, or board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	•	east for the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each v	by the shareholders through voting group orting group entitled to vote separately or	•
"The number of votes cast for the	amendment(s) was/were sufficient for ap	pproval
by		
	(voting group)	
10/01/2021		
Dated		
Signature		
selected, by a	, president or other officer – if directors on incorporator – if in the hands of a receivaciary by that fiduciary)	
	Javice Suches May	Alinez Bexceano
	(Typed or printed name of person si	gning)
	- Salien	
	(Title of person signing)	