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A. Butler 10/4/21

## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: EAS Trucking Inc.

DOCUMENT NUMBER: P21000076485 DOCUMENT NUMBER: \_\_\_\_\_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: EAS Trucking Inc. 809 NE 199 S+ Apt #107
Address MIAMI, FL 33179

City/ State and Zin Code info@eliteautoshipper.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AKPAN at ( 305 ) 772 - 6865 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

## Articles of Amendment

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## Articles of Incorporation

EAS Trucking Inc
(Name of Corporation as currently filed with the Florida Ben? SIState) 3: 43
P21060076485
(Document Number of Corporation (if known))
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent UKO AKFAN
New Registered Office Address:  1801 NE 154 ST NMB, FL 33162 (OLD)  (Florida street address)  809 NE 199 St Apt 107, Florida 33179 (new 199 St Apt 107)  (City)  (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 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)Change	<u>_P</u>	Michael Lewis	2350 NW 63rd ST
Add			MIAMI, FL 33147
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
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<u>provisions for implen</u> (if not applicable,	nenting the amer indicate N/4)	ndment if not c	ontained in the a	mendment itself	<u> </u>	
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The date of each amendment(s) adoption:	09/16/2	. \	, if other than the
date this document was signed.	1 1		. If other than the
Effective date <u>if applicable</u> :O	1 1 - 1		<u></u>
	(no more than 90)	days after amendment file date	·)
Note: If the date inserted in this block doe document's effective date on the Department		ble statutory filing requiremen	its, this date will not be listed as the
Adoption of Amendment(s) (9	CHECK ONE)		
The amendment(s) was/were adopted by taction was not required.	he incorporators, or bo	oard of directors without shareh	nolder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient f		number of votes east for the an	nendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each vot			
"The number of votes cast for the ar	nendment(s) was/were	sufficient for approval	
by		···	
(	voting group)		
Dated 09 16	/ 2(	A	
Signature	<u> </u>	r – if directors or officers have	nut haun
selected, by an i		hands of a receiver, trustee, or	
	UKO	AKPAN	
<del></del>		nme of person signing)	
	Pre:	sident	
	(Title of person sign	ing)	