P21000086704

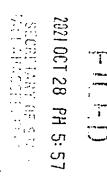
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: P21000086704 DOCUMENT NUMBER: VCE TRUCKING INC The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: VLADIMIR ESPINAL Name of Contact Person VCE TRUCKING INC Firm/ Company 1700 SAN PABLO ROAD SOUTH APT 519 Address JACKSONVILLE, FL 32224 City/ State and Zip Code VLADIMIESPINAL14@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: VLADIMIR ESPINAL at (347) 225-5831

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: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (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 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2021 OCT 28 PM 5: 57

VCE TRUCKING INC	SECRETARY OF STAR
(Name of Corporation as current	tly filed with the Florida Dept. of State 12 53 11 11
P21000086704	g.
(Document Number of	of Corporation (if known)
(Boetiment Author)	or conjoinment (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
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.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida s	treet address)
() tortal si	ren daaressy
New Registered Office Address:	Florida
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New 1	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)

Example:

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 heid. 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>	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	CAROLYN BORDAS	1700 SAN PABLO ROAD SOUTE
X Add			APT 519
Remove			JACKSONVILLE, FL 32224
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

ach additional sheets, if necessary).	(Be specific)
	
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n amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
ovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
•	
	n/a
_	1701

The date of each amendme		, if other than the
date this document was signe		
Effective date if applicable	10/25/2021	
	(no more than 90 days after amendment fil	e date)
	n this block does not meet the applicable statutory filing requi the Department of State's records.	rements, this date will not be listed as th
Adoption of Amendment(s	(<u>CHECK ONE</u>)	
The amendment(s) was/w action was not required.	ere adopted by the incorporators, or board of directors without	shareholder action and shareholder
	rere adopted by the shareholders. The number of votes cast for were sufficient for approval.	the amendment(s)
	eere approved by the shareholders through voting groups. The folded for each voting group entitled to vote separately on the ame	
"The number of vo	es cast for the amendment(s) was/were sufficient for approval	
by		
J	(voting group)	
10/2	15/2021	
Dated		
Signature	o lar Efe	
	(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, trust appointed fiduciary by that fiduciary)	
	VLADIMIR ESPINAL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	