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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Hydes	Trucking, INC.
DOCUMENT NUMBER: P210000	90812
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
TESHA	L. HyDES Name of Contact Person
	Name of Contact Person
Llydes	TRUCKING, INC.
	Firm/ Company
	LACKEYED SUBAN DRIVE
RIVERVIE	W. FLORIDIA 33579
	City/ State and Zip Code
hydestruck E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
Name of Contact Person	at (813) 334 · 1238 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	le payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) S\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations The Control of Tallahassas
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Hyths Trucking Inc.		1. MAY 211	
(<u>Name o</u>	of Corporation as currently	filed with the Florida Dent of State	<u> </u>
P21000090812		SECRETARY TALLAWAS	OF STATE
	(Document Number of C		SEE, FL
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this FI	orida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		•
Hydes Trucking, Inc.			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" chartered," "professional association," B. Enter new principal office address, (Principal office address MUST BE A Sociation of the August BE A POST of the August	Corp, " 'Inc, " or "Co". A point or the abbreviation "P.A." if applicable: TREET ADDRESS icable:		
D. If amending the registered agent an new registered agent and/or the nev		ss in Florida, enter the name of the	,
	Nicholas O. Hydes		
Name of New Registered Agent			
	11811 Blackeyed Susan Driv		
	(Florida stree	l address)	22570
New Registered Office Address:	Tampa	, Florida	
	(0	City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar wi		position.
CXI	Signature of New Reg	sistered 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)

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)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Nicholas O. Hydes	11811 Blackeyed Susan Drive
X Add			Riverview, Florida 33579
Remove			<u> </u>
2) Change	S	Tesha L. Hydes	11811 Blackeyed Susan Drive
X Add			Riverview, Florida 33579
Remove 3) Change	v	Kernado Thomas	11811 Blackeyed Susan Drive
Add			Riverview, Florida 33579
X Remove			
4) Change			
Add			
Remove			
5) Change	 	·	
Add			
Remove			
6) Change			
Add			
Remove			

acii dudiionai sheets, y necessary	rticles, enter chang v). (Be specific)	re(s) nere.			
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an amendment provides for an ex	xchange, reclassific	ation, or cancella	tion of issued share	S.	
rovisions for implementing the ar (if not applicable, indicate N/A)	mendment if not co	ntained in the am	endment itself:	_	
(y noi applicable, inaicale WA)					

.		
ne date of each amendment	May 15th, 2022 (s) adoption:, if other t	han the
te this document was signed.	· · · · · · · · · · · · · · · · · · ·	
Tective date if applicable:	May 15th, 2022	
rective date <u>ir applicable</u> .	(no more than 90 days after amendment file date)	 - -
	his block does not meet the applicable statutory filing requirements, this date will not be listed the Department of State's records.	d as the
doption of Amendment(s)	(CHECK ONE)	;
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action and shareholder	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by the President and	Secretarty "	!
oy	(voting group)	
May 1 Dated	5, 2022	
Signature		·
n sc	a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Nicholas O. Hydes	į
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	