# P21000095853

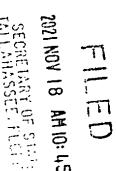
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PICK-UP	WAIT	MAIL	
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Certified Copies	Certificates	of Status	
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# **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DEREK TRUCHS	NG SERVICES INC			
DOCUMENT NUMI	BER: P21000095853				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	itter to the following:			
	EULICES BENITEZ				
	Name of Contact Person				
		Firm/ Company			
	15701 SW 137TH AVE APT 102				
	Address				
	MIAMI FL 33177				
	City/ State and Zip Code				
	COUNTYWIDEINSURANCE@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, plea	se call:			
EULICES BENITEZ		786	762-5378		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

2021 NOV 18 AM 10:

#### DEREK TRUCHING SERVICES INC.

SECRETARY OF STAT (Name of Corporation as currently filed with the Florida Dept. of State) TALLAHASSEE, FLOR P21000095853 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: DEREK TRUCKING SERVICES INC 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 (Florida street address) New Registered Office Address: , Florida (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. Signature of New 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)

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

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<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				

	r adding additional nal sheets, if necessar	ry) (Be specific)			
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	r implementing the	<u>amendment if not o</u>	<u>contained in the an</u>	<u>nendment itself:</u>	
provisions fo	plicable, indicate N/A	1)			
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirent epartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ade action was not required.	opted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were so	opted by the shareholders. The number of votes cast for the officient for approval.	amendment(s)
	proved by the shareholders through voting groups. The followed each voting group entitled to vote separately on the amenda	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
11/12/2021 Dated		
selecte	irector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ted fiduciary by that fiduciary)	
	EULICES BENITEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

. . . . .