P22000035639

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
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cial Instructions to Filing Officer:	
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A. RAMSEY DEC 22 2022

TALLAHASSEE, FLORIL

2022 DEC 22 AM 10: 29

RECEIVED

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COVER LETTER

D: Amendment Section
Division of Corporations

AME OF CORPORATION: TRUCK & TR	RAILER MOBILE REPAIR INC
OCUMENT NUMBER: P22000038639	
he enclosed Articles of Amendment and fee are	sobmitted for filing.
lease return all correspondence concerning this	matter to the following:
LU	JIS E MUNOZ
	Name of Contact Person
<u> </u>	Firm/ Company
1532 QU	IINTA ROAD
	Address
KISSIMM	EE. FLORIDA 34744
	City/ State and Zip Code
FASTSERVICESRE	HAIR@GMAIL.COM
E-mail address: (to be	used for future annual report notification)
or further information concerning this matter, pl	ease call:
LUIS E MUNOZ	at () 7803723
Name of Contact Person	Area Code & Daytime Telephone Number
inclosed is a check for the following amount made	de payable to the Florida Department of State:
■ \$35 Filing Fee S43.75 Filing Fee & Certificate of Status	
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



December 22, 2022

LUIS MINOZ 1532 QUINTA ROAD KISSIMMEE, FL 34744

SUBJECT: TRUCK & TRAILER MOBILE REPAIR INC

Ref. Number: P22000038639

We have received your document for TRUCK & TRAILER MOBILE REPAIR INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This amendment can not be filed until after the revocation of dissolution is filed since the corporation is not active at this time.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey OPS

Letter Number: 622A00028677

Articles of Amendment to Articles of Incorporation of

FILEU

2022 DEC 22 AM II: 34

TRUCK & TRAILER MOBILE REPAIR INC

(Name of Corpo	ration as currently	filed with the Florida Dept. of State)	1 1 100
P22000038639	1		\$ 3 F
(De	oument Number of	Corporation (if known)	
rsuant to the provisions of section 607.1006, Flo Articles of Incorporation:	orida Statutes, this F	lorida Profit Corporation adopts the follo	wing amendment(s) t
If amending name, enter the new name of th	e corporation:		
			The new
me must be distinguishable and contain the word ac.," or Co.," or the designation "Corp," "I hartered," "professional association," or the al	nc," or "Co". A	professional corporation name must co	viation "Corp.," intain the word
Enter new principal office address, if applica	able.	1533 Barbury dr	
rincipal office address MUST BE A STREET A		1538 Barberry dr Kindred TI 34744	<u> </u>
			_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>)	Kindre Fl 3474	<u>. </u>
		Kindre +1 3474	4
If amending the registered agent and/or registered agent and/or the new register		ss in Florida, enter the name of the	
Name of New Registered Agent			
	(Florida stree	rt address)	
New Registered Office Address:		, Florida	
	(0		Zip Code)
w Registered Agent's Signature, if changing ereby accept the appointment as registered age		th and accept the obligations of the positi	on.
	ignature of New Res	gistered Agent, if changing	
note if any limble			
eck if applicable The amendment(s) is/are being filed pursuant to	s. 607.0120 (11) (e	a), F.S.	

Idress of each Officer a ttach additional sheets, lease note the officer/dir = President; V= Vice I secutive Officer; CFO = resident, Treasurer, Dire changes should be noted	and/or D if necess rector titl President Chief Fi ector wot in the fot	irector being a eary) e by the first let ; T= Treasurer inancial Officer uld be PTD. llowing manner	ter of the office title: S= Secretary; D= Director; If an officer/director holds m Currently John Doe is listed	officer/director being removed and title, name, and TR = Trustee; C = Chairman or Clerk; CEO = Chief fore than one title, list the first letter of each office held. These should be noted as John Doe, PT as a Change,
ike Jones, V as Remove, rample:	, and Sali	ly Smith, SV as	an Add.	
Change Change	<u>PT</u>	John Doe		
C Remove	$\underline{\mathbf{V}}$	Mike Jones		
∠ Add	<u>SV</u>	Sally Smith		
pe of Action Theck One)	<u>Title</u>	<u>Nam</u>	<u>e</u>	Address
Change	P	BRA	ULIO J MATA	2212 GRAND CAYMAN CT APT
Add		_		APT 1625
X Remove				KISSIMMEE, FL 34741
X Change	P	LU	IS MUNOZ	111 E MONUMENT AVE
Add				SUTE 412
Remove Change				KISSIMMEE, FL 34741
Add				
Remove				
Change				
Add				
Remove				
Change				.
Add				
Remove				
Change		_		
Add				
Remove				

If amending or adding additional Articles, en	ter change(s) here:
Attach additional sheets, if necessary). (Be sp	
MOVE BRAULIO MATA FROM THE COMP	ANY AND CHANGE LUIS MUNOZ AS PRESIDENT
	
	<u> </u>
If an amendment provides for an exchange in	eclassification, or cancellation of issued shares,
provisions for implementing the amendment	if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	
 -	
	

e date of each amendment(s) adoption:	12/17/2022		, if other than the
e this document was signed.	-	 -	, ii ouici man me
ective date <u>if applicable</u> :	(n) more than 90 da	iys after amendment file date)	
te: If the date inserted in this block does ument's effective date on the Department	s not meet the applicable		date will not be listed as the
option of Amendment(s)	CHECK ONE)		
The amendment(s) was/were adopted by the tion was not required.	he incorporators, or boar	rd of directors without shareholder ac	tion and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for		mber of votes east for the amendmen	t(s)
The amendment(s) was/were approved by nust be separately provided for each voti			nent
"The number of votes cast for the ar	nendment(s) was/were si	ufficient for approval	
by		<u>.</u> .	
(1)	voting group)		
12/17/2022 Dated	7/		
Signature			
(By a discuss, pr selected, by an in		if directors or officers have not beer nds of a receiver, trustee, or other co	
LUIS 8	E MUNOZ		
	(Typed or printed nam	ne of person signing)	
PRESI	DENT		
	(Title of person signin	g)	