P22000053309

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COVER LETTER

Division of Corporations		
NAME OF CORPORATION: ADAL SERVIC	ES CORP	
DOCUMENT NUMBER: P22000053309		_
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
ADALBERTO GONZALE	EZ ROQUE	
	Name of Contact Person	
ADAL SERVICES CORP		
-	Firm/ Company	
200 NW 107TH AVE APT	108	
	Address	
MAIMI, FL 33172		
	City/ State and Zip Code	
carimontalvo65@gmail.co	m	
E-mail address: (to be	used for future annual report notification)	_
For further information concerning this matter, ple	ease call:	
ADALBERTO GONZALEZ ROQUE	at (786) 543-3742	
Name of Contact Person	Area Code & Daytime Telephone 3	Number
Enclosed is a check for the following amount mac	le payable to the Florida Department of State:	
■ \$35 Filing Fee □\$43.75 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

Articles of Amendment to Articles of Incorporation of

ADAL SERVICES CORP	2046 - 1 BH 201
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P22000053309	
(Document Number o	f Corporation (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:	
ADAL FORKLIFT SERVICES CORP	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "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>)	n/a
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	nla
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>s:</u>
Name of New Registered Agent N C-	
(Florida sta	reet address)
New Registered Office Address: M/c-	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Signatury of New k	Registered Agent, if changing
Signature of them I	register on regently grounding
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 Doc	2	
X Remove	$\underline{\mathbf{V}}$	Mike Jon	nes	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	Title		<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		<u> </u>		
Parava				

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
· Ma	
-	
-	
-	
f an amandment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

		07/28/2022	
		ment(s) adoption:	, if other than the
	date this document was sig		
	Effective date if applicab	07/28/2022 ble:	<u>.</u> .
•	intective date it applicate	(no more than 90 days after amendment file date)	
	Note: If the date inserted document's effective date	d in this block does not meet the applicable statutory filing requirements on the Department of State's records.	s, this date will not be listed as the
	Adoption of Amendment	t(s) (CHECK ONE)	
	The amendment(s) was action was not required	s/were adopted by the incorporators, or board of directors without sharehod.	lder action and shareholder
	☐ The amendment(s) was by the shareholders wa	s/were adopted by the shareholders. The number of votes east for the ame as/were sufficient for approval.	endment(s)
	must be separately pro	s/were approved by the shareholders through voting groups. The following ovided for each voting group entitled to vote separately on the amendment	g statement t(s):
		votes cast for the amendment(s) was/were sufficient for approval	
	by	(voting group)	
		(voting group)	
	0° Dated	07/28/2022	
	Signatur	10 alachets Original Roque	
	o.g.m.ca.	(By a director, president or other officer – if directors or officers have n selected, by an incorporator – if in the hands of a receiver, trustee, or o	not been
		appointed fiduciary by that fiduciary)	ther court
		ADALBERTO GONZALEZ ROQUE	
		(Typed or printed name of person signing)	
		(Typed of printed name of person signing)	
		PRESIDENT	