P23000048807

(Requestor's Name)
(Address)
(Address)
(,
10, 10, 17, 10
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,





400422727534

02/01/24--01010--019 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION:	cord Services Inc					
NAME OF CORPORATION: THO CORD SERVICES INC DOCUMENT NUMBER: P23 0000 48 807						
The enclosed Articles of Amendment and fee at	re submitted for filing.					
Please return all correspondence concerning this						
	Jazara Johana Name of Contact Person / 18					
· ·	Name of Contact Person					
2820	NW 26 th ST					
Fort L	anderda e FL 33311					
	City/ State and Zip Code					
E-mail address. (to b	Address Address Address City/ State and Zip Code pa 1623 @ gmail. com be used for future annual report notification)					
For further information concerning this matter,						
La 7ara	at 186 1609 1545					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount m	nade payable to the Florida Department of State.					
□\$43.75 Filing Fee □\$43.75 Filing Fee Certificate of State	_					
Mailing Address	Street Address					
Amendment Section	Amendment Section					
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee					
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810					

Tallahassee, Fl. 32303

Articles of Amendment

to Articles of Incorporation
- Hacord Gervices INC
(Name of Corporation as currently filed with the Florida Dept. of State)
- P 23 0000 48 807
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Johana Truck Corp The new
name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "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)
(maining matress provided by the book)
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:
new registered agent and/or the new registered office address.
Name of New Registered Agent
(Florida street address)
New Registered Office Address:, Florida
(Cuy) (Zip Code)
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,

Example: X Change	<u> 197</u>	<u>John Doe</u>	
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>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
<i>δ</i>) Change			_
Add			
Remove			

(Attach additional sheets, if necessary), (Be specific)	
.	·
	_
	
If an arrandoment annotate for an arrandom is a second second second because	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	

The date of each amendment(s) ad date this document was signed	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, thartment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
★ The amendment(s) was/were adopaction was not required	ted by the incorporators, or board of directors without shareholde	raction and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the amendaticient for approval.	nent(s)
	oved by the shareholders through voting groups. The following st ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	01/10/2024	
	01/10/2024 Lh/ds	1
selected.	ector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or other diductary by that fiductary)	
	Lazara Johana	
	(Typed or printed name of person signing) PRESI & ENT	
_	(Title of person signing)	