P23000049708

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _____ TRUCK & TRAILER REPAIR SERVICE INC

DOCUMENT NUMBER: P23000049708

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANALIC DEL VALLE MADRIZ MARTINEZ

Name of Contact Person

TRUCK & TRAILER REPAIR SERVICE INC

Firm/ Company

4457 VECINO LOOPUNIDAD 103

Address

KISSIMMEE, FL 34746

City/ State and Zip Code

rociocisnerostax@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANALIC MADRIZ MARTINEZ at (321) 9003311 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🗐 \$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallabassee, 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

TRUCK & TRAILER REPAIR SERVICE INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P23000049708

(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:

,

N/A				The nev	.c
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contract or Contract of the second second second second to the second	Corp," "Inc," or "Co". A				
B. Enter new principal office address,	if applicable:	109 N BEAUMONT AVE	NUE		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		KISSIMMEE, FL 34741			
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		109 N BEAUMONT AVENUE			
		KISSIMMEE, FL 34	741		
D. <u>If amending the registered agent and new registered agent and/or the ne</u> <u>Name of New Registered Agent</u>			<u>10 of the</u>		
	(Florida stra	ret address)			
<u>New Registered Office Address:</u>	N/A		. Florida,	• •	
		(City)		EC EM	دهرینه ۲ از ۱۹۹۱ م
New Registered Agent's Signature, if c				9-	, erzn 19
I hereby accept the appointment as regis	tered agent. – I am familiar w	ith and accept the obligation:	of the position:	AH 11: (T.
	Signature of New Re	rgistered Agent, if changing		·	

Check if applicable

□ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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:**

Example: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	<u>Mike Jones</u>	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check Onc)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	ANALIC MADRIZ MARTINEZ	1532 QUINTA RD
X Add			KINDRED FL 34744
Remove			<u>_</u>
2) Change		<u> </u>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•		

A	al sheets, if necessa	ry). (Be specific			
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provisions for	implementing the	amendment if no	t contained in the a	<u>ation of issued shar</u> mendment itself:	<u>es,</u>
(if not app	licable, indicate N/A	0			
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11/21/2023

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- □ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes east for the amendment(s) was/were sufficient for approval

by 🔄

(voting group)

11/21/2023

EDMUNDO MADRIZ

Signature

Dated

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

EDMUNDO MADRIZ

(Typed or printed name of person signing)

Р

(Title of person signing)

_____, if other than the