P24000056120

(Requestor's Name)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: NATION HAUL B	ROKERS INC	
DOCUMENT NUME	BER: P24000056120		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	NICOLE REYNOLDS		
		Name of Contact Person	1
	NATION HAUL BROKERS	INC	
,		Firm/ Company	
	645 BONSAI ST		
•		Address	
	APOPKA, FL 32703		
		City/ State and Zip Code	2
	NATIONHAULBROKERS@	GMAIL.COM	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
NICOLE REYNOLDS	5	at (<u>407</u>	917-0902 de & Daytime Telephone Number
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as current)	y filed with the Florida Dept. of State)
P24000056120	Zeri GOT 30 Fill IG: 34
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "C" inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	1 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>)	
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 addinew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	eet aldress)
New Registered Office Address:	(Cuy) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	
Signature of New R	egistered Agent, if changing
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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)

Example:

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	MGR	LLOYDEL HUME	645 BONSAI ST
Add	`		APOPKA. FL 32703
X Remove			
2) Change	MGR	SHALAYNA BROWN	645 BONSAI ST
Add			APOPKA. FL 32703
X Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
,	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ц) пт аррисате, таксае 197А)	

	09/20/2024		
The date of each amendment(s) date this document was signed.	adoption:	, if ot	her than the
Effective date if applicable:			
	(no more than 90 days	s after amendment file date)	
Note: If the date inserted in this document's effective date on the E		statutory filing requirements, this date will not be	listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were ac action was not required.	lopted by the incorporators, or board	of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were ac by the shareholders was/were		ber of votes cast for the amendment(s)	
	proved by the shareholders through reach voting group entitled to vote s	voting groups. The following statement separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were suf	ficient for approval	
bv		. "	
	(voting group)		
10/24/202	.t		
Dated		 ,	
Signature		0.1.	
` -	director president or other officer – i	ds of a receiver, trustee, or other court	
	nted fiduciary by that fiduciary)	is of a receiver, trastee, of other court	
	NICOLE REYNOLDS		
	(Typed or printed name	of person signing)	_
	OWNER/PRESIDENT		
	(Title of person signing))	