P950000 18858

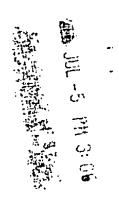
(Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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COVER LETTER

Tallahassee, FL 32314

•	COVER LETTER
TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: 47 -	trucking
DOCUMENT NUMBER: 45000	<u>018858</u>
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Might 6212 H Jack	Name of Contact Person Z Trucking Firm/ Company High Tide Blud. Address SONVILLE, FL 32258 City/ State and Zip Code
E-mail address: (to b	be used for future annual report notification)
For further information concerning this matter, p	please call:
Mike Zulon Name of Contact Person	at (321) 474-4888 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Statu	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

		જારે .
Articles of Incorporation		
	of S	
KZ. Taxhin	g INC	
(Name of Corporation as cur	rently filed with the Florida Dept. of State)	FIELD C
P9500001	 8858	-3
(Document Numb	ber of Corporation (if known)	4.14
	•	17.5
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the fo	llowing amendm
A. If amending name, enter the new name of the corporation	<u>n:</u>	
h 7 Truck/N	J. TNC.	The ne
name must be distinguishable and contain the word "corpo	varion " "company " or "incorporated" or	
"Corp.," "Inc.," or Co" or the designation "Corp." "Inc." word "chartered," "professional association," or the abbreviat	or "Co". A professional corporation name	must contain th
	10217 High Tigh	RNA
B. Enter new principal office address, if applicable:	WCIC TIKY TICE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Tacksonville	27758
C. Enter new mailing address, if applicable:	6212 Hide Tide	Rivid
(Mailing address MAY BE A POST OFFICE BOX)	<u>VZ 17 (110) 1100</u>	
	Jacksonville, Fl	. 3275
	-3-10-10-10-10-10-10-10-10-10-10-10-10-10-	
D. If amending the registered agent and/or registered office		
new registered agent and/or the new registered office add	uress.	
Name of New Registered Agent		
$\bigcap I$		
	<u>/-l</u>	
(Florid	ida street address) N	110
New Registered Office Address:	, Florida,	V/ / H
	(City)	(Zip Code)
Now Designand Ament's Commence of shanning Designand A	ant.	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami		ition
,	un programma and programma and programma programma and programma and programma and programma and programma	
A	In a Decrease 1 to 1 to 2 to 2	
Signature of N	lew Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, na 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; P = Director; TR = Trustee; C = Chairman or Clerk; CEO Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of eacheld. 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. 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 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	V	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			
3) Change	}		·
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N)/A-

······································
F. 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)
NIA

The date of each amendment(s) adoption:	, if othe
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 require document's effective date on the Department of State's records.	ements, this date will not be lis
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	hareholder
Dated 02/21/2019	
Signature / ()	
(By a director, president or other officer – if directors or officers be selected, by an incorporator – if in the hands of a receiver, trustee	nave not been
appointed fiduciary by that fiduciary)	, or other court
Miguel Zulon	
(Typed or printed name of person signing)	
Owner	
(Title of person signing)	