P960000052798

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Amend Cclass

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Jode Trucking, Inc. P96000052798 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jorge Acevedo Name of Contact Person Jode Trucking, Inc. Firm/ Company 8040 NW 95th Street, Suite #106 Address Hialeah Gardens, FL 33016 City/ State and Zip Code iodetrucking@aol.com " Lemai E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jorge Acevedo Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment to Articles of Incorporation of

Jode Trucking, Inc.			_
(Name of Corporation as currentive	y filed with the Florida De	pt, of State)	_
P96000052798			_
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida Pr</i>	rofit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			_The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or t	orp," "Inc," or "Co". A p		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	 		14 1817 2
			1 NOV 24 MIN: 86
D. If amending the registered agent and/or registered agent and/or the new register		rida, enter the name of the	के हैं।
Name of New Registered Agent			
	(Florida street address,)	
New Registered Office Address:		, Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	t. I am familiar with and ac		
Signature of	f New Registered Agent, if ch	anging	

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Р	Jorge Acevedo	8040 NW 95th Street, Suite
Add			Hialeah Gardens, FL 3301
Remove	V	Traci A. Snyder	8040 NW 95th Street, Suite
2) Change		Tradition Onlydoc	Hialeah Gardens, FL 33016
Remove			
Change Add			
Remove			
4) Change			
Add			
5) Change			
Add		,	
Remove			
6) Change			
Remove			

(If amending or adding additional Articl (Attach additional sheets, if necessary).	les, enter change(s) here: (Be specific)
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	"" 	
]	If an amendment provides for an exchan provisions for implementing the amend (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
-		

The date of each amendment(s) adoption: 11/18/2014	, if other than the
date this document was signed.	
Effective date if applicable: 11/18/2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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 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 and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Date: 11/18/2014	
Signature doge Occuredo	
(Bed 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)	
Jorge Acevedo	
(Typed or printed name of person signing)	
President	
(Title of person signing)	