P900043259

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	= #)
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION:RELIABLE MOV	ING & STORAGE, INC.		
DOCUMENT NUME			· · ·	
	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	MICHAEL J. FAEHNER			
		Name of Contact Person	1	
	M. FAEHNER, ESQ., LLC			
		Firm/ Company		
	600 BYPASS DR STE 100			
		Address		
	CLEARWATER, FL 33764			
	·	City/ State and Zip Cod	e	
FILM	NGS@MFAEHNER.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
THOMAS CAMPBE	LL	at (
Name (of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
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

Articles of Amendment to Articles of Incorporation of

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

RELIABLE MOVING & STORAGE, INC.

97000043259				
	(Document Number of C	orporation (if known)		
ursuant to the provisions of section 607. s Articles of Incorporation:	1006. Florida Statutes, this <i>Fl</i>	orida Profit Corporation a	dopts the following an	nendment(s)
If amending name, enter the new na	me of the corporation:			
			Th	
ame must be distinguishable and cont Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corpore		
Enter new principal office address, Principal office address <u>MUST BE A S</u>	-	 		
				
			<u> </u>	 1
. Enter new mailing address, if appli	cable:			- : 1
(Mailing address MAY BE A POST (OFFICE BOX)		<u>::. ८</u>	<u> </u>
			· ;	
				اب. س
			3.8	
 If amending the registered agent an new registered agent and/or the nev 		s in Florida, enter the nar	ne of the	
	MICHAEL J. FAEHNER			
Name of New Registered Agent	600 BYPASS DR STE 100			
	(Florida street	t oddressi		
	CLEAWATER		33764	
Mary Parietaead Offica Addrace		itv)	Florida(Zip Code	
New Registered Office Address:	l C	• *	mp com	.,

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	STRANGE. STEVEN M	1030 SEDEEVA STREET
Add			CLEARWATER, FL 33755
Remove			
2) Change	P	SAMS, MEL CPA	1454 MAIN ST STE B
X Add			DUNEDIN, FL 34698
Remove			
3) Change		_ _	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	litional sheets, if nec	essary). (Be spe	cific)			
<u>.</u>				<u> </u>		
						
<u> </u>			_			·
	 			<u> </u>	<u> </u>	-
						
				,		
						<u> </u>
	 					
	_					
fan amer	idment provides for	r an exchange, rec	classification, or	cancellation of i	ssued shares.	
provision	s for implementing	the amendment i	f not contained	in the amendmen	t itself:	
(if no	t applicable, indicate	e N/A)				
					. <u></u>	
				<u> </u>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 req document's effective date on the Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast fo by the shareholders was/were sufficient for approval.	r the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the ar	
"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 was not required.	on and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action as action was not required. Dated Signature By a director president or other officer – if directors or office selected, by an incorporator – if in the hands of a receiver, tru appointed fiduciary by that fiduciary) MEL SAMS, CPA	ers have not been
(Typed or printed name of person signing)	
Successor Trustee of the STEVEN M. STRANGE TR	UST DATED March 7, 2006

(Title of person signing)