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### **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: DAN'S HAULING INC.				
DOCUMENT NUMBER: (45 (78) 109 12				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
MARY LOMBARDI Name of Contact Person	<u>.</u>			
DAN'S HAULING, INC. Firm/ Company				
•				
8110 30 th AUE N. Address	-			
Address				
St. Peters by State and Zip Code				
City/ State and Zip Code				
doughouting inc @ hot mail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
MARU LOMBARDI 31(727) 204-2120				
Name of Contact Person at (777) 204 - 2180  Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certificate of Status  Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				

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

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

# Articles of Amendment to

## Articles of Incorporation

(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	da Statutes, this <i>Florida Pr</i>	ofit Corporation adopts the follo	wing amendment(s) t
A. If amending name, enter the new name of the	corporation;		
			The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	p," "Inc," or "Co". A pi	any," or "incorporated" or the rofessional corporation name m	e abbreviation ust contain the
B. Enter new principal office address, if applicab			_ 22
Principal office address <u>MUST BE A STREET AD</u>	ODRESS )		
			温节岩
	<del></del>		10000000000000000000000000000000000000
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	OX)		呈り
			700
	·		<del></del>
D. If amending the registered agent and/or regist		rida, enter the name of the	
new registered agent and/or the new registere	a oruce address:		
Name of New Registered Agent	1		
	(T) 11 (1) 11 (1)		
	(Florida street address)		
New Registered Office Address:	(City)	, Florida (Zip Code	<del>)</del>
	1	(	-

Signature of New Registered Agent, if changing

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.

X Change	PT John l	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>PS</u>	MARY LOMBARDI	8110 30th AVEN.
Remove			St. Patersbury Fl. 33710
2) Change		Daniel A. Lombaroi JR.	SHO 30th AVE N St. Petersburg Fl 33710
Remove 3) Change	TR	DAWN M. HARRIS	2045 EAST BAY DE \$610 LARGO, FL 33771
Remove			
4) Change Add Remove			
5) Change			
Remove			
6) Change	•	<u> </u>	
Remove			

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amendment provides for an	exchange, reclassific	ation, or cancellation of issued shares,
visions for implementing the	amendment if not co	ation, or cancellation of issued shares, natained in the amendment itself:
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visions for implementing the (if not applicable, indicate N/	amendment if not co	ation, or cancellation of issued shares, mtained in the amendment itself:

The date of each amendment(s) add	ption:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amer ficient for approval.	idment(s)
	oved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast fi	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopt action was not required.	sted by the board of directors without shareholder action and sh	areholder .
action was not required.	oted by the incorporators without shareholder action and shareh	oider
Dated_	dy Sombain	
	ector, president or other officer - if directors or officers have n by an incorporator - if in the hands of a receiver, trustee, or of	
	diductary by that fiductary)	
	MARY LOMBARKI	
	(Typed or printed name of person signing)	
_	SECRETARY	
	(Title of person signing)	