P980000 13284

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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

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TO: Amendment Section Division of Corpo		COVER LETTER		1 JIL 20 14
	Town MAIN		Truck Salos	7nc &
DOCUMENT NUMB	ER: 19 00001 <u>3</u> .	201		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
-	Brown 406 North	Firm/ Company Address Address City/ State and Zip Cod	+ Truck Sole Ray	
Cynthic	concerning this matter, pleas Alvacado Contact Person	at (PSY	_) <u>706 2279</u> de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□S43.75 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)	
Amer	ng Address adment Section ion of Corporations	Ameno	Address Iment Section on of Corporations	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to

Articles	of	Incorporation
	.,.	men por action

Droward Select Truck Sales INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P98000013284
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Broward Select Trucks Inc
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevious "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
(Principal office address MUST BE A STREET ADDRESS)
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 address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent CYNTIA AVAIRCE
18731 NW 12th ST
(Florida street address)
New Registered Office Address: Pembroke Pines Florida 33023 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
() 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 hold. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc 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> <u>John</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	- Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Anthony Rubic	18731 NW 12th ST Rembroke Pines FE 3302
Add)	Rembroke Pinus FZ 3302
_X Remove			
2) Change	P	Cynthia Alvarado	18731 NW 12th ST
_X Add			Pernemone. Pinos Fl
Remove			33029
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
<i>δ</i>) Change			
Add			
Remove			

	Iding additional Ar sheets, if necessary),	(Bv specific)				
						
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an amendment	provides for an exc	hange, reclassific	ation, or cancel	lation of issued s	hares,	
<u>provisions for im</u>	iplementing the am	endment if not co	ntained in the a	mendment itself	<u>:</u>	
(if not applied	able, indicate N/A)					
						
			-			
		-				

The date of each amendment(s) adoption: 6/15/17 if other than the date this document was signed.
Effective date if applicable: 6/15/17 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.
Dated 6/15/17
Signature Cynthyo Qllowooloo (By a 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)
Cynthia Alvarado (Typed or printed name of person signing)
President (Title of person signing)