



ICARD MERRILL
ATTORNEYS & COUNSELORS

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October 31, 2017

icardmerrill.com

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Colonial Concrete Company, LLC

Dear Sir/Madam:

Enclosed for filing, please find "Articles of Amendment to Articles of Organization" for the above mentioned LLC, along with our check for \$25 for the filing fee.

Please call us if you should have any questions. Thank you.

Sincerely,

Carol DeBlasio
Legal Assistant

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

COLONIAL CONCRETE COMPANY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1/24/2011 and assigned Florida document number L11000009740.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1608 3rd Street Circle East

Palmetto, Florida 34221

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1608 3rd Street Circle East

Palmetto, Florida 34221

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Richard S. Webb, IV, Esq.

New Registered Office Address:

c/o Icard Merrill et al, 2033 Main Street, Suite 600

Enter Florida street address

Sarasota

City

Florida 34237

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



If Changing Registered Agent, Signature of New Registered Agent

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STATE OF FLORIDA

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Rick A. Cripe	1608 3rd Street Circle East	<input checked="" type="checkbox"/> Add
		Palmetto, Florida 34221	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Phil Morris	P.O. Box 14640	<input type="checkbox"/> Add
		Bradenton, Florida 34280	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Susan K. Flynn, Esq.	P.O. Box 14640	<input type="checkbox"/> Add
		Bradenton, Florida 34280	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Randall A. Bono	P.O. Box 9067	<input type="checkbox"/> Add
		Bradenton, Florida 34206	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 PALMETTO, FLORIDA
 STATE
 ARCHIVES

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

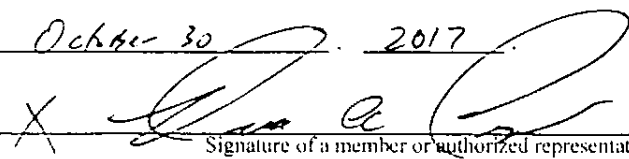
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October 30, 2017

X 
Signature of a member or authorized representative of a member

Rick A. Cripe

Typed or printed name of signee

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA