P18000071238

| (Reques | stor's Name) | |
|--------------------------------|---------------|-------------|
| | | |
| (Addres | s) | |
| | | |
| (Addres | s) | |
| (City/Sta | ate/Zip/Phone | · #) |
| , , | ' | , |
| PICK-UP | WAIT | MAIL |
| | | |
| (Busine | ss Entity Nam | ne) |
| | | |
| (Docum | ent Number) | |
| | | |
| Certified Copies | Certificates | of Status |
| | | |
| Special Instructions to Filing | n Officer: | |
| opecial instructions to 7 mily | · · | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |





200453647572

07/02/25--01005--008 ++35.00



COVER LETTER

, \$

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: SLAB CONTRA | ACTORS INC | | | |
|--|--|--|--|--|
| DOCUMENT NUMBER: P18000071238 | - | | | |
| The enclosed Articles of Amendment and fee are | submitted for filing. | | | |
| Please return all correspondence concerning this r | natter to the following: | | | |
| JOSHUA WHITNEY | | | | |
| | Name of Contact Persor | 1 | | |
| SLAB CONTRACTORS II | NC | | | |
| Firm/ Company | | | | |
| 6170 MARSH TRAIL DRI | VE | | | |
| | Address | | | |
| ODESSA FL 33556 | | | | |
| | City/ State and Zip Code | | | |
| JOSH19663814@GMAIL. | СОМ | | | |
| E-mail address: (to be | used for future annual report | notification) | | |
| For further information concerning this matter, ple | ease call: | | | |
| JOSHUA WHITNEY | at (<u>813</u> | 917-9041 | | |
| Name of Contact Person | Area Coo | de & Daytime Telephone Number | | |
| Enclosed is a check for the following amount mad | e payable to the Florida Depa | rtment of State: | | |
| S35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status | S43.75 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 | Amendi Division The Ce 2415 N | Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303 | | |

Articles of Amendment to Articles of Incorporation of

FILED

SLAB CONTRACTORS INC

2025 1111 2 2

| SLAB CONTRACTORS INC | -020 JUL -2 AM 8: L7 |
|---|---|
| (Name of Corporation as current | tly filed with the Florida Dept. of State) |
| P18000071238 | E STATE |
| (Document Number | of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A. | "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: | 6170 MARSH TRAIL DRIVE |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | ODESSA FL 33556 |
| | |
| 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 registered agent and/or the new registered office address | |
| Name of New Registered Agent Jeshua | m. leihitney |
| (511) (5 f) (Florida st | Marsh Trail Dr |
| New Registered Office Address: () 8 | (City) Florida 3355 (City) (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar | <u>t:</u> with and accept the obligations of the position. |
| Signature of New F | Registered Agent, if changing |
| Check if applicable | |
| ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) | (c), F.S. |

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)

Example:

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 = ChiefExecutive 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 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 | PRES | GLORIA S WILLIAMS | 4233 GLOUCHESTER RD |
| Add | | | BROOKSVILLE FL 34604 |
| Remove 2) Change | PRES | JOSHUA WHITNEY | 6170 MARSH TRAIL DRIVE |
| X Add | | | ODESSA FL 33556 |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | - | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional | dding additional Ar sheets, if necessary) | . (Be specific) | | | | |
|-------------------|--|--------------------|--------------------|-------------------|---------------|--|
| | | | | | | |
| | • | | | | | |
| | | | • · · | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | _ | _ | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | · • | | | |
| | | | | | | |
| | · <u> </u> | | | | | |
| | | | | - | . | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | <u> </u> | | | | | |
| | | | | | | |
| | | • | | | | |
| | | | | | | |
| f an amandmant | provides for an exc | change reclassifie | otion or cancellat | tion of issued sh | gres | |
| provisions for in | uplementing the am | endment if not co | ntained in the am | endment itself: | | |
| (if not applic | able, indicate N/A) | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

٠.

| 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 document's effective date on the | block does not meet the applicable statutory filing requirements, this date with Department of State's records. | ll not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were a action was not required. | dopted by the incorporators, or board of directors without shareholder action an | d shareholder |
| ☐ The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| ☐ The amendment(s) was/were : must be separately provided f | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): | TILE 1005 JUL-2 |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approval | |
| JOSHUA WHITNE | Υ | m or the |
| .,, | (voting group) | 管量 口 |
| Dated 6/3 | 1/2025 | 8. <u>1</u> |
| Signature | Att | · |
| selec | director, president or other officer – if directors or officers have not been ted by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) | |
| | JOSHUA WHITNEY | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |

. .