To: 8506176380 Division of Corporations

From: 4073372050

11-17-20 9:03am p. 2 of 6 https://efile.sunbiz.org/scripts/efilcovr.exe



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : SHUKER & DORRIS, P.A.

Account Number : I20200000092 Phone : (407)337-2060 Fax Number : (407)337-2050

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: hmartin1837@gmail.com

## COR AMND/RESTATE/CORRECT OR O/D RESIGN SEMINOLE PRECAST, INC.

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From: 4073372050

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## Articles of Amendment to Articles of Incorporation of

Seminole Precast, Inc.			
(Name of Corporation as curr	ently filed with the Florida Dept. of	State)	
L37167			
(Document Numb	er of Corporation (if known)	· ·	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adop	ts the following a	mendment(s) to
A. If amending name, enter the new name of the corporation	<u>r.</u>		
Semmox, Inc.		<i>T</i>	hė 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 professional corporation num	the abbreviation '	"Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 1194		
	Edgewater, FL 32132		~
		·	020
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		of the	620 NOV 17 1
Name of New Registered Agent			= []
(Florid	la street address)		7 AM 10: 44
·	·	,	4
New Registered Office Address:	(City)	lorida <u>(Zip Coa</u>	(e)
New Registered Agent's Signature, if changing Registered Af I hereby accept the appointment as registered agent. I am famil		f the position.	
Signature of Ne	w Registered Agent, if changing		
Check if applicable			

 $\blacksquare$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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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:

 $P = President; V \cdot Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

Changes should be noted in the following manner. Currently John 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	PT	John Doc		2020 NGV
X Remove	Y	Mike Jones		YOV
X Add	<u>şv</u>	Sally Smith		17
Type of Action (Check One)	Title	Name	<u>Addres</u> s	AH IO:
l)Change				
Add			<u> </u>	
Remove				<del></del>
2) Change			<del> –</del>	<u> </u>
Add				
Remove 3) Change	<del></del>			
Add			· · · · · · · · · · · · · · · · · · ·	
Remove				
4) Change				·· <del>···································</del>
			<del> </del>	<u> </u>
Remove				
5) Change				······································
Add				
Remove			<del></del>	
6) Change				
,Add				
Remove				

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visions for implementing the amendment if not contained in the ar	ition of issued sha nendment itself:	<u>'es,</u>		
visions for implementing the amendment if not contained in the ar	ntion of issued sha nendment itself:	<u>'es,</u>		
amendment provides for an exchange, reclassification, or cancella visions for implementing the amendment if not contained in the ar (if not applicable, indicate N/A)	ntion of issued sha nendment itself:	··es,		
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The date of each amendment(s) adoption:	, if	other th	an the
Effective date if applicable:	<del></del>		
(no more than 90 days after amendment file dute)			
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	ll not b	e listed	as the
Adoption of Amendment(s) (CHECK ONE)			
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required.	d share)	nolder	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.		202	Ų
☐ 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):		7. I. AON 0202	
"The number of votes cast for the amendment(s) was/were sufficient for approval		7	
by	<u>:</u>	AH	
(voting group)		4H 10: 44	
November 14, 2020		ŧ-	
Signature Attillucation (1-4)			
(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)			
H. Martin Neiswander			
(Typed or printed name of person signing)			
President			
(Title of person signing)			