

7/12/22, 9:13 AM

F220000000000157

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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((H22000236520 3)))



H220002365203ABCW

*NIC Amend*

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RECEIVED

2022 JUL 12 AM 10:59

To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (954)208-0845  
Fax Number : (614)573-3996

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

Email Address: \_\_\_\_\_

2022 JUL 12 PM 11:49

FILED

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
BARDON, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$43.75

A. RAMSEY  
JUL 13 2022

Electronic Filing Menu

Corporate Filing Menu

Help

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F22000000156

(Document number of corporation (if known))

1. BARDON, INC.

(Name of corporation as it appears on the records of the Department of State)

2. Maryland

(Incorporated under laws of)

3. 01/06/2022

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 5/1/2022

5. Holcim - MAR, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. 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

(Florida street address)

New Registered Office Address:

(City)

Florida

(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*

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	Add
_____	_____	_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

\_\_\_\_\_  
 (Signature of a director, president or other officer - if in the hands of  
 a receiver or other court appointed fiduciary, by that fiduciary)

Jodic Earle

(Typed or printed name of person signing)

Secretary

(Title of person signing)

**FILING FEE \$35.00**

Acknowledgement Number: 1000362013614534

***STATE OF MARYLAND***  
***Department of Assessments and Taxation***

I, Michael L. Higgs, Director of the State Department of Assessments and Taxation, hereby certify that the attached document, consisting of 2 pages, inscribed with the same Authentication Code, is a true copy of the public record of the

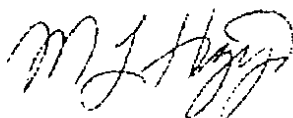
**ARTICLES OF AMENDMENT / NAME CHANGE-CORPORATION**

for  
**HOLCIM - MAR, INC.**

(Department ID: **D14179014**)

I further certify that this document is a true copy generated from the online service with the State Department of Assessments and Taxation.

In witness whereof, I have hereunto subscribed my signature and affixed the seal of the State Department of Assessments and Taxation of Maryland at Baltimore on this July 05, 2022.



Michael L. Higgs  
Director



301 West Preston Street, Baltimore, Maryland 21201  
Telephone Baltimore Metro (410) 767-1344 / Outside Baltimore Metro (888) 246-5941  
MRS (Maryland Relay Service) (800) 735-2258 TTY/Voice

Online Certificate Authentication Code: yfEabGsYbDEmjn6XAQ8PgZg  
To verify the Authentication Code, visit <http://dat.maryland.gov/verify>

**CORPORATE CHARTER APPROVAL SHEET****\*\* EXPEDITED SERVICE \*\*****\*\* KEEP WITH DOCUMENT \*\***DOCUMENT CODE 09A BUSINESS CODE \_\_\_\_\_# 014179014

Close \_\_\_\_\_ Stock \_\_\_\_\_ Nonstock \_\_\_\_\_

P.A. \_\_\_\_\_ Religious \_\_\_\_\_

Merging /Converting \_\_\_\_\_

Surviving/Resulting \_\_\_\_\_



1000362013614534

 ID # D14179014 ACK # 1000362013614534  
 PAGES: 0002  
 HOLCIM - MAR, INC.

04/26/2022 AT 12:42 P WO # 0005114318

New Name Holcim - Mar, Inc.**FEES REMITTED**
 Base Fee: 100  
 Org. & Cap. Fee: 425  
 Expedite Fee: \_\_\_\_\_  
 Penalty: \_\_\_\_\_  
 State Recordation Tax: \_\_\_\_\_  
 State Transfer Tax: \_\_\_\_\_  
 Certified Copies \_\_\_\_\_  
 Copy Fee: \_\_\_\_\_  
 Certificates \_\_\_\_\_  
 Certificate of Status Fee: \_\_\_\_\_  
 Personal Property Filings: \_\_\_\_\_  
 NP Fund: \_\_\_\_\_  
 Other: \_\_\_\_\_
TOTAL FEES: 525

Credit Card \_\_\_\_\_ Check \_\_\_\_\_ Cash \_\_\_\_\_

\_\_\_\_\_ Documents on \_\_\_\_\_ Checks

Approved By: 19

Keyed By: \_\_\_\_\_

COMMENT(S):

☒ EFF Date 05/01/2022
☒ Change of Name  
☐ Change of Principal Office  
☐ Change of Resident Agent  
☐ Change of Resident Agent Address  
☐ Resignation of Resident Agent  
☐ Designation of Resident Agent  
☐ and Resident Agent's Address  
☐ Change of Business Code  
☐ Adoption of Assumed Name  
☐ Other Change(s)
Code 007

Attention: \_\_\_\_\_

Mail: Names and Address

 ASHLAND CORPORATE SERVICES, LLC  
 2405 YORK ROAD  
 SUITE 201  
 LUTHERVILLE TIMONIUM MD 21093-2264

 CUST ID: 0003897743  
 WORK ORDER: 0005114318  
 DATE: 04-26-2022 12:42 PM  
 AMT. PAID: \$525.00

ARTICLES OF AMENDMENT  
for a  
MARYLAND STOCK CORPORATION

\*\*\*\*\*

Bardon, Inc., a Maryland corporation, certifies to the State Department of Assessments and Taxation of Maryland that the charter of the corporation shall be, and hereby is amended as follow:

"The name of the corporation is Holcim – MAR, Inc."

With future effective date of 05/01/2022.

This amendment of the charter of the corporation has been approved by the directors and shareholder.

The undersigned acknowledges that this is an act of the above-named corporation, and verifies, under the penalties for perjury, that the matters and facts stated herein, which require such verification, are true and accurate to the best of his/her knowledge, information, and belief.

ATTESTED BY:  Anthony Bond, Treasurer SIGNED BY:  Jodie Earle, Secretary

Return address of filing party:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CUST ID: 0003897743  
WORK ORDER: 0005114318  
DATE: 04-26-2022 12:42 PM  
AMT. PAID: \$525.00