2008 LIMITED LIABILITY COMPANY
AMENDED AN UAL REPORT

DOCUMENT # L060000494284

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MAKAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

## FILED SECRETARY **OF S**TATE TALLAHASSEE, FLORIDA

Daytime Phone #

1. Entity Name READY MIX SOLUTION LLC							08 MAY - 1 PM 2: 33				
Principal Place of Business 4207 30TH LANE EAST BRADENTON, FL 34208 US			Mailing Address 3816 W LINEBAUGH AVE 114 TAMPA, FL 33618 US				11 BRISH BIIH BSIU BOSII 61			) <b>8 8 1</b> 91 4 1 <b>5 8 1</b>	
2. Principal P	lace of Busin	ess - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04222008	Chg-LLC	CR2E	083 (12/06)	
City & State			City & State				4. FEI Numb 20-486			<del></del>	plied For at Applicable
Zip			Zip	try	5. Certificate of Status Desired \$5.00 Additional Fee Required						
	6. Name	and Address of Current R	egistered Agent Name				7. Name and Address of New Registered Agent				
SEBRE, BILL W 3816 W LINEBAUGH AVE TAMPA, FL 33618					Street Address (P.O. Box Number is Not Acceptable)						
				City	ity FL Zip Code					e	
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
All manages when a human manage in affairs and main sphinospia. (MOTE: Matheman Vigori affairs and when (elustrated)) DATE											
Aı	mended A	AR is \$50.00								payable to nent of State	<del>D</del>
9.		MANAGING MEMBER	S/MANAGERS	10.				ADDITIONS	/CHANGE	S	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4207 30TI	JEZ ŁAMAS, DORIS A H LANE E TON, FL 34207	🔀 Delete			420	ACHO, CA 07 30TH	ARLOS A LANE EAST FL 34208		☐ Change	<b>⊠</b> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			MGF BRA 420	RM ACHO, CA	ARLOS R LANE EAST	3	☐ Change	<b>⊠</b> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			420	СНО, JO 7 30TH	SE R LANE EAST FL 34208		Change	<b>⊠</b> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		[					☐ Change	Addition
TITLE*, NAMÉ; SÍRIET ADDRESS CITY-ST-ZIP			□ Delete			-	© 05/0	1 <b>00128</b> 35/080104	5 <b>41</b> 7020	□ Change 1:310 ) **50.	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Defete							☐ Change	Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the regerver of the provided to execute this report as required by Chapter 608, Florida Statutes.											