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TO:	Registration Sec Division of Corp		,		
	⊶ USA COI	NCRETE SERVICES			
SUBJE	7: <u>00/100</u> :		ited Liability Company)		
The enc	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspon	ndence concerning this matter	to the following:		
		Ronald Riccardi			
			(Name of Person)		
USA Concrete Services, LLC					
			(Firm/Company)		
		49448 Western Acre	es Dr		
			(Address)		
		Tickfaw, LA. 70466			
			(City/State and Zip Code)	<del></del>	
For furt	ner information co	oncerning this matter, please of	call:		
Ronal	d Riccardi		at (985 ) 350-6025		
	(Name o	of Person)	(Area Code & Daytime	Telephone Number)	
Enclose	d is a check for th	e following amount:			
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION OF

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SECRETARY OF STATE TALLAHASSEE FLORIDA

USA Concrete Services, 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 AUGUST 09, 2007 \_ and assigned Florida document number <u>L07000081873</u> 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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: New Registered Office Address: (Enter Florida street address) (City)

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 608, 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)

## or Managing Member being added or removed from our records:

MGR = Manager MGRM.= Managing Member <u>Title</u> <u>Name</u> **Address Type of Action** MGR\_ RONALD RICCARDI 2710 DEL PRADO BLVD. 2-249 ☐ Add CAPE CORAL, FL 33904 Remove MGRM\_ TRACY ORTENGREN 20650 GROVELINE CT ESTERO, FL. 33928 Add ☐ Remove MGRM.... MGRM ROGER CAMPAGNOLO 1094 PROSPERTY WAY FORT MYERS, FL. 33912 Remove ☐ Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated FEBRUARY, 13 2008 Signature of a member or authorized representative of a member

Typed or printed name of signee

**RONALD RICCARDI** 

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Filing Fee: \$25.00