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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

MAY - 5 2008

EXAMINER

· COVER LETTER

		· 	
TO: Registration Division of C			
SUBJECT: CEME	NT EXPRESS OF CARI	BBEAN, LLC	
		nited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are sui	bmitted for filing.	
	pondence concerning this matter	•	
	MATEO USUGA		
		(Name of Person)	and the control of th
		(Finn/Company)	
	5600 SW 145 AVEN		
		(Address)	
	SOUTHWEST RAN	CHES, FL 33330 (City/State and Zip Code)	
For further information	concerning this matter, please o	call:	
MATEO USUGA		at (786) 486-6238	
(Nam	e of Person)	(Area Code & Daytime Te	elophone Number)
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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 Registration Section Division of Corporatio Clifton Building 2661 Executive Center	ns
r eris	emorally a deleter.	Tallahassee, FL 32301	

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CEMENT EXPRESS OF CARIBBEAN, LLC

SECRETARY OF STATE OF CORPORATIONS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liebility Company as it now appears on our records.)
(A Florida Limited Liability Company) The Anti-les of Organization for this Limited Charatty Company were filed on 11/20/2007 Florida document number <u>L07000117579</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CEMENTOS EXPRESOS DEL CARIBE, LLC 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) Florida (City) (Zip Code)

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)



MGR = Manager

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM=	Managing Member			
Title	Name	Address	Type of Act	ton
			Add Remove	
The Control of the Co			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add	DIV.
D. If amer	ading any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	08 MAY -2	SION SECKE
			PM 4: 02	OF CORPORATIONS
		4	02	OHS.
Dated <u>04//</u>		/		
	Signature of a member	er or eathorized representative of a member	<u> </u>	
	Турес	d or printed name of signee		
	/	Page 2 of 2		
	ı.	Filing Fee: \$25.00		,

