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(City/State/Zip/Phone #)						
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(Business Entity Name)						
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SECRETARY OF STATE

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APR - 7 2008

EXAMINER

COVER LETTER

Pivision of Co					
SUBJECT: A&S CO	NCRETE CUTTING & D	EMOLITION, LLC.			
The enclosed Articles o	Amendment and fee(s) are subm	uitted for filing.			
Please return all corresp	ondence concerning this matter to	the following:			
	ADRIAN NUNEZ				
		(Name of Person)			
A&S CONCRETE CUTTING & DEMOLITION (Firm/Company)					
	7240 NW 46 STREET				
		(Address)			
	MIAMI, FL 33166				
		City/State and Zip Code)		200 SE TAL	
For further information	concerning this matter, please cal	1:		2008 APR -4 SECRETARY ALLAHASSE	
ADRIAN NUNEZ		at (305) 392-1650		-4 SSE	-
(Name	of Person)	(Area Code & Daytime 7	'elephone Number)	BAPR -4 AM 10: 50 CRETARY OF STATE LAHASSEE, FLORID	
Enclosed is a check for	the following amount:	/		SO SO	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate o Certified Co (additional c	f Status &	

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 TO ARTICLES OF ORGANIZATION OF.

A&S CONCRETE CUTTING & DEMOLITION, LLC.

(Name of the Limited	d Liability Company as A Florida Limited Liabili	it now appears on or ry Company)	ır records,)			
The Articles of Organization for this Limited L	Liability Company were	filed on <u>01/17/20</u>	08	and a	ssigne	d
Florida document number <u>L08000005910</u>	·					
This amendment is submitted to amend the following	lowing:					
A. If amending name, enter the new name of	of the limited liability	company here:				
N/A						
The new name must be distinguishable and end wi "L.L.C."	ith the words "Limited Li	ability Company," th	e designation "	SEC	2008	
B. If amending the registered agent and	law wastatawad affica			±m	P. 4	1
registered agent and/or the new registered o		laaress on our re	coras, <u>enter</u>	ine mime	br ru	e new
registered agent and or the new registered o	ince address here.			ĔΥ	*	m
				<u> </u>	₹	-
				LOS X	AM IO:	
Name of New Registered Agent:	<u>N/A</u>		··		ম	
New Registered Office Address:	7240 NW	46 street (Enter Flo	····	>		
		(Enter Flo	orida street aa	ldress)		
	Man	/	, Florida	33144	,	
	(C)	fee)		(Zin Č	oda)	

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.

doging Registered Agent, Signature of New Registered Agent)

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

MGR = Manager

MGRM = Managing Member **Type of Action** Title ' Address <u>Name</u> MGRM ALTAGRACIA UMANA 7240 NW 46 ST Add MIAMI, FL 33166 **∏** Remove MGRM EDDY E. VERGARA, JR. 7240 NW 46 ST MIAMI, FL 33166 ✓ Add Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member FORIAN NUNEZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00