Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FOWLER WHITE BOGGS, P.A.

Account Number : I20040000146

Phone Fax Number : (904)598-3100 : (904)446-2636

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

Emmil Address:	phillip.glbbs@fowlerwhite.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BAKER AGGREGATES INVESTMENTS, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAKER AGGREGATES INVESTMENTS, LLC

FILED

10 JUN 29 AM 8: 33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) May 5, 2009 The Articles of Organization for this Limited Liability Company were filed on and assigned L09000043902 Florida document number 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX) 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:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Zip Code

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:

MGR = Ma MGRM = I	nnager Managing Member	•			1			•
Title	<u>Name</u>		Address		•		Type of	Action
MGRM	Baker Aggregates Holdings, LLC	5367 Orteg	Add Remove					
MGRM.	Edward L. Baker, II	· · , .	4395 McGi Jacksonvill	rts Boulevar e. El. 32210	d		Add	ve .
MGRM	John D. Baker, II	· · · · · ·		ide Avenue. e. FL 32202		500	Add Remo	ve ·
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D. If amer	nding any other information	anter change	s) here: (Attac	h additional sh	ients if	necessary	Remo	Y C
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Dated	June 28	201	0	e e	:		AM 8: 33 OF STATE FLORIDA	
٠ .	Signatu	J.	or authorized repr Phillip Gibbs r printed name of	3	member			

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