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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ASMA & ASMA, P.A. Account Number : I20060000067 Phone : (407)656-5750 Fax Number : (407)656-0486

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

Email Address: arnold@ Steelworxusa. Com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GREEN WORX, LLC

Certificate of Status	0
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

GREEN WORX, LLC		
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our rec ed Liability Company)	ords.)
The Articles of Organization for this Limited Liability Compa	uny were filed on 10/13/2015	and assigned
Florida document number L15000174121		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
CONCRETE WORX SOLUTIONS, LLC		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "I	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
vo		20
Enter new mailing address, if applicable:	<del></del>	- cn
(Mailing address MAY BE A POST OFFICE BOX)		The same of the sa
		55
B. If amending the registered agent and/or registered offic	oo addrace on our records, onl	tor the name of the naw registeres
b. It amending the registered agent and/or registered office address here:	te audiess on our records, em	φ
		. 0
Name of New Registered Agent:		:.
New Registered Office Address:		
New registered Office Address.	Enter Florida street add	iress
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Age	nt:	

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 605, 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.

To: Division of Corporation Page: 3 of 4 2025-01-15 21:44:59 GMT 14073863174 From: Charles Asma

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
<del></del>			□Add
			□Remove
			□Change
			□Add
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			Remove
			□Change
			□Add
			□Remove
			□Change

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. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: I	the date, if other than the date of filing:  (optional)  (attive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as not's effective date on the Department of State's records.
he record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	01/14/2025 Alux
	Signature of a member or authorized opportunitative of a member
	ARWIN'S 5 STEYL  Typod or printed name of signos