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COVER LETTER

TO:

Registration Section

Division of Co	rporations		
	OCONCRETE PUMPING LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MARTIN JOHNSON		
		Name of Person	
	1354 13TH ST		
		Firm/Company	
		Address	
	WEST PALM BEACH, F		
	johnsonmartin2923@gmail	City/State and Zip Code	
		to be used for future annual report no	tification)
For further information	concerning this matter, please c	all:	
MARTIN JOHNSON		772 530-2808	
Name o	of Person		me Telephone Number
Enclosed is a check for	he following amount:		
■ \$25.00 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 Addre Registration Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOHNSON CONCRETE PUMPIN	G, LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears o Liability Company)	n our record <u>s.</u>)	
The Articles of Organization for this Limited L Florida document number L17000156220	iability Company	were filed on $\frac{07/21}{2}$	/2017	_ and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here	:	
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the desig	znation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:		1354 13TH ST		
Principal office address MUST BE A STREET ADDRESS)		WEST PALM BEA	ACH FL 33401	
Enter new mailing address, if applicable:				24 .11.1
(Mailing address MAY BE A POST OFFICE BOX)			; - .	
B. If amending the registered agent and/or a agent and/or the new registered office addre	4,7	address on our reco	ords, enter the name	رب دربا of the new registe
Name of New Registered Agent:	MARTIN JOH	NSON		
New Registered Office Address:	1354 13TH ST			
		Enter Florida	street address	
	WEST PALM	ВЕАСН	, Florida 3340	l
		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 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.

If Changing Registered Agent, Signature of New Registered Agent

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
MGR	MARTIN JOHNSON	1354 13TH ST	
		WEST PALMN BEACH FL 33401	□ Remove
			≅ Change
AMBR Esmie Coley Insurance Agency,	Esmie Coley Insurance Agency, LL	500 S AUSTRALIAN AVE	□Add
		STE 600 PMB1175	■Remove
		WEST PALM BEACH FL 33401	□ Change
			□Add
	•		□Remove
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Note:	ve date, if other than the date of filing: (optional) ctive 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 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
he record ord is fil	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 ed.
Dated _	June 27th 2024
	Signature of a member or authorized representative of a member
	MARTIN JOHNSON

Filing Fee: \$25.00