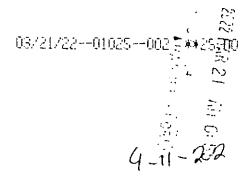
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Office Use Only



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COVER LETTER

Division of Corp		•	<i>s</i>
subject: <u>WeSŁ</u>	Coast Concre Name of Lim	te & Pavers, LLG	<u> </u>
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Justa	us Shagoury Name of Person	
	Westco	ast Concrete &	Pavers, LLC
	5903	1世 Ave Address	
	New Po	ort Richey, FL 3. City/State and Zip Yode	4652
		on crete II Coam to be used for future annual report noti	
For further information co	ncerning this matter, please co	all:	
Justus Shame of 1	agoury Person	at (727) 645- Area Code Daytin	8644 ne Telephone Number
Enclosed is a check for the	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 Address: Registration So Division of Co P.O. Box 6327	ection rporations	Street Address: Registration Se Division of Cor The Centre of T	rporations Fallahassee
Tallahassee, FI	J 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Westcoast Concrete (Name of the Limited Liability Company (A Florida Limited Liability Company)	y ds it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company w Florida document number <u>L1900031935</u> .	vere filed on <u>Jan 31, 201</u> 9	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability American Ogsis, L.C. The new name must be distinguishable and contain the words "Limited Liability		bbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	5903 1월 Ave New Port Prichey,	FL 34652
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Emer Florida street address	
	, Florida	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>	<u>Name</u>	Address	Type of Action
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			□Remove
			□ Change
			□ Add
			□Remove
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effective date is listed	er than the date of filind. the date must be specific and ted in this block does not	d cannot be prior to date of	filing or more than 90 days:	optional) after filing.) Pursuant to 605.02 this date will not be listed
	late on the Department of			
	s a delayed effective er the record is filed		fective time, at 12:0)1 a.m. on the earlier
ed 3-14	· - 27			
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	Xighture of a	member or authorized rep	resentative of a member	