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COVER LETTER

TO:	Registration Se Division of Cor		, š	
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SUBJE	CT:	CRETE & STUCCO LLC		<u> </u>
		Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		PAUL BOLEMAN		
			Name of Person	
		AAA CONCRETE & STU	ACCO FFC	
			Firm/Company	
		2828 MINEOLA DRIVE		
			Address	
		LAKELAND FL 33801		
			City/State and Zip Code	
		aaa.concrete.n.stucco@g		
			to be used for future annual report n	otification)
For furt	her information c	oncerning this matter, please c	all:	
PAUL !	BOLEMAN		863 595-8588	3
	Name o	f Person	Area Code Days	ime Telephone Number
Enclose	d is a check for th	ne 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 Addres Registration S		Street Address: Registration S	
	Division of C		Division of C	
	P.O. Box 632		The Centre of	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AAA CONCRETE & STUCCO LLC

(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number L20000099420	Company were filed on APRIL 8, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		200
(Principal office address MUST BE A STREET ADDI	RESS)	0 APR 27
Enter new mailing address, if applicable:		, p
(Mailing address MAY BE A POST OFFICE BOX)		<u>, 8</u>
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter the na</u>	ame of the new registered
Name of New Registered Agent:		<u></u>
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	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 amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager

· AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	PAUL W. BOLEMAN	2828 MINEOLA DRIVE	□Add
		LAKELAND, FL 33801	□Remove
			≣ Change
MGR	HUEY JOHNSON JR	2711 N. COMBEE ROAD	🗆 Add
•		LAKELAND, FL 33805	■Remove
			□Change
MGR	AUBREY BOWERS JR	2711 N COMBEE ROAD	
		LAKELAND, FL 33805	■Remove
			□Change
			□Remove
			Change
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			□Remove
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			Change

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Filing Fee: \$25.00