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	Division of Corporations Fax Number : (850)63					
From:	Account Name (CARLED)	CED 11 CEC 11				
	Account Name : CAPITON Account Number : I201600	900017	С.			
	Phone : (855)49 Fax Number : (800)43					
*Enter t	he email address for this	business enti	cv to be use	ed for fut	ure	
	al report mailings. Enter					
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the Florida Department of		
State: Lehigh Hanson Cement South LLC			_
Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			_ _
2. The Florida document number of this limited liab	oility company is: M19000008631		_
3. Jurisdiction of its organization: Delaware			
4. Date authorized to do business in Florida: 09/06.	/2019		
SECTION II (5-9 complete only the applicable cl			
5. New name of the limited liability company: HN (must	1 Southeast Cement LLC contain "Limited Liability Company," "L.L.C.,	or "LLC	C. ")
(If name unavailable, enter alternate name adopted to copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C.	aging members adopting the alternate name. The	a and attace e alternate	anne :
6. If amending the registered agent and/or registered registered agent and/or the new registered office ade	d officer address on our records, enter the name dress here:	of the new	- .
Name of New Registered Agent:			_ _
New Registered Office Address:		95	_ - -
	Enter Florida Street Address	٠: ت	S
	, Florida City Z	ip Code	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as register document is being filed to merely reflect a change ir liability company has been notified in writing of this	istered Agent: and agree to act in this capacity. I further agre nd complete performance of my duties, and I an red agent as provided for in Chapter 605, F.S. (the registered office address, I hereby confirm	e to comp n familiar Or, if this	with
——————————————————————————————————————	anging Registered Agent, Signature of New Res	zistered A	gent

3. If the amendment el	anges person, title or capacity in acc	cordance with 605.0902 (1)(e), indicate tha	t change:
itle/ Capacity	Name	Address	Type of Action
			□Add
			□Remov
			□Add
			□Remov
			□Add
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			□Add
aforementioned amo	cale, if required: no more than 90 da indment(s), duly authenticated by the ic law of which this entity is organiz	e official having custody of records in the	□Remove
		authorized representative	
	Carol Lowry Typed or printed		

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Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "LEHIGH HANSON CEMENT SOUTH LLCT, CHANGING ITS NAME FROM "LERIGH HANSON CEMENT SOUTH LLC" TO "AM SOUTHEAST CEMENT LLC", FILED IN THIS OFFICE ON THE TWENTY-SECOND DAY OF DECEMBER, A.D. 2022, AT 7:07 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF JANUARY, A.D. 2023.

Authentication: 205195978

Date: 12-28-22

3274042 8100 SR# 20224359389

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DocuSign Envelope ID: 7AF69FF5-FABD-4D6C-BE4E-99AB7F9AF094

State of Delawara
Scrietary of State
Division of Corporations
Delivered 07:07 PM 12/22/2022
FILED 07:07 PM 12/22/2022
SH 20224359384 - FileNumber 3274042

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

effect	ive January 1, 2023 as follows:
The	CLE I. NAME name of the limited liability company is: outheast Cement LLC
	ITNESS WHEREOF, the undersigned have executed this Certificate (19/2022)
IN W	day of December A.D. 2022