# P000 000 84805

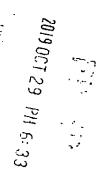
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## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Concrete Services, Pump + Finish, Inc.  DOCUMENT NUMBER: P0000084805
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alberto Perez  Name of Contact Person  Concrete Services, Pump & Finish Inc.  Firm/Company  10061 SW 44 Street  Address  Miami, FL 33165  City/ State and Zip Code  Concreteservices & Yahoo. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alberto Perez at 305, 218-2467  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status (Additional copy is enclosed)  CISS2.50 Filing Fee Certificate of Status (Additional Copy is enclosed)

## Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

# Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to
Articles of Incorporation
of

Concrete Servi		1p + Fini		<u>nc</u> .
(Name of Corpor		filed with the Florida		
Podo	DDD 848	705		
<del></del>		Corporation (if known)		· · · · · ·
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this <i>Fl</i>	orida Profit Corporati	on adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of the	e corporation:			
				The new
name must be distinguishable and contain the w"Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the containing the containin	orp," "Inc," or "Co the abbreviation "P.,	o". A professional co	corporated" or the corporation name in	ie ahbreviation iust contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				<del></del>
. ,				
				2019(
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)			i.
				29
			<del></del>	777
				—————————————————————————————————————
D. If amending the registered agent and/or registered agent and/or the new register		ss in Florida, enter the	e name of the	ယ ယ
Name of New Registered Agent				
· · · · · · · · · · · · · · · · · · ·	(Florida street	t address)		
New Registered Office Address:			, Florida	
New Kegistereu Office Address.	(C	`ity)		(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen		th and accept the while	ations of the posit	ion
Thereo, accept the appointment as regimered agen	n. i um jummur wit	a and accept me onig	инта од те ромп	
S	Signature of New Reg	gistered Agent, if chang	ging	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>J</u>	John Doe	
X Remove	<u>V</u> 1	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	$\overline{\mathcal{T}}$	Victor Tavares	10061 SW 44 St.
Add Remove			Miami, FL 3.3165
2) Change	$\mathcal{I}$	Victor Pouzo-Rocha	10061 SW44 St Miani, FL 33165
Remove 3 ) Change Add			
Remove 4) Change			
Add			
5) Change Add			
Remove			
6) Change Add			
Remove			

	s, if necessary).	(Be specific)				
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an amendment providerovisions for implement (if not applicable, in	enting the amen	ange, reclassifica	ition, or cancellat	ion of issued sha	res,	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by,"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/26/2019	
Signature All Signature	
(By a director, president or other officer - if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
appointed inductary by that inductary)	
Alberto Perez	<u></u>
(Typed or printed name of person signing)	
President	
(Title of person signing)	