P03000141819

(Reques	stor's Name)	
(Addres	s)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

C. LEWIS
JUN 2 7 2014
EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Acosta Brick Pavers, Inc.				
DOCUMENT NUMI	DOCUMENT NUMBER: P03000141819			
	of Amendment and fee are su			
Please return all corre	spondence concerning this ma	tter to the following:		
	Raul A Martin			
		Name of Contact Person	1	
	Acosta Brick Pavers, Inc.			
		Firm/ Company		
	1699 N Paul Dr			
		Address		
	Inverness, FL 34	453-0335		
		City/ State and Zip Code	e	
abı	oaver@gmail.com			
		sed for future annual report	notification)	
For further information concerning this matter, please call:				
			470 0700	
Raul A Martii		_{at (} 352	_ 476-8796	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amo Div P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301	

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Amendment to Articles of Incorporation of

14 JUN 16 PM 3: 15

Acosta Brick Pavers, Inc.	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
P03000141819	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent N/A	
(Florida stree	et address)
New Registered Office Address:	, Florida
(Ciry)	(Zip Code)
N D:-4d 441-6:4 '6-b! D:-4d 44.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
•	
Signature of New Registered Ag	gent, if changing

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)

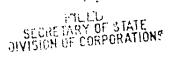
Please note the officer/director title by the first letter of the office title:

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>	John Doe	
X Remove	<u> </u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Noel Escalante-Cantero	1699 N Paul Dr
∧dd			Inverness, FL 34453-0335
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If ame</u> (Attach	ending or adding additional Art a additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
N/A			
-			
			* - 4.0
provi	mendment provides for an exclusions for implementing the amount of the implement of the indicate N/A)	nange, reclassification, or cancellated and the amount of	ion of issued shares, endment itself:



The date of each amendmen	t(s) adoption: N/A	14 JUN 16 PM 3:	15 , if other than the
date this document was signed	L		
Effective date if applicable:	N/A		
	(no more tha	n 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. Tere sufficient for approval.	The number of votes east for the amendr	nent(s)
The amendment(s) was/we must be separately provide	ere approved by the shareholders led for each voting group entitled	through voting groups. The following st to vote separately on the amendment(s)	atement :
"The number of vote	s cast for the amendment(s) was/	were sufficient for approval	
by	(voting group)		
	(voting group)		
The amendment(s) was/we action was not required.	re adopted by the board of direct	ors without shareholder action and share	:holder
The amendment(s) was/we action was not required.	re adopted by the incorporators v	without shareholder action and sharehold	ler
Dated	6/13/2014		
Signature	And I		
(I	· · · · · · · · · · · · · · · · · · ·	fficer - if directors or officers have not	
	elected, by an incorporator – if in ppointed fiduciary by that fiduciary by	n the hands of a receiver, trustee, or other ary)	r court
	Raul A Martin		
	(Typed o	or printed name of person signing)	
	President		
		(Title of person signing)	