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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION: Concrete Magick,	Inc	
DOCUMENT NUM	P060001.24601		
The enclosed Articles	s of Amendment and fee are su	ubmitted for filing.	
Please return all corre	espondence concerning this ma	itter to the following:	
	Ricki J. Black		
		Name of Contact Person	n
	Concrete Magick, Inc.		
		Firm/ Company	
	102 N E 2nd Street #271	- 1 2	
		Address	
	Boca Raton, Fl. 33432		
		City/ State and Zip Cod	e
		,	
For further informatio	n-man address: (to be u	sed for future annual report se call: 561	463-5005
Name of Contact Person		at () de & Daytime Telephone Number
	or the following amount made		, ,
□ \$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)
Mailing Address 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	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Concrete Magick, Inc.	
(Name of Corporation as currer	ntly filed with the Florida Dept. of State)
P06000124601	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address 	
	<u></u>
Name of New Registered Agent	
	
(Plonda)	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	n <u>t:</u> r with and accept the obligations of the position.
Signature of New	Registered Agent, 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	PT Joh:	ı Doe		
X Remove	V Mik	e Jones		
X Add	<u>SV</u> <u>Sall</u>	y Smith		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
1) X Change	VC	Black, F	Richard (S. 102 NE 2nd St. #271
Aċċ		-		Boon Paton PC
Remove				<u> </u>
2) Change	I	Black	RICKUT	102 NE 2nd St. #271
Add				BCCO POTON FC 33432
Remove 3.) Change	PD	Cubena	rs Claram	102 NE 2nd St. #371
X Add	.))	Baca Batan, PL
Remove				33432
4, Change	CD	Dalmau	J, L.F.	102 NE 2nd St. #271
X Add				Boog Ration, FC
Remove				20709
5) Change	VPD	Navarr	Juan J	102 NE 2nd St. #271
X Add				Boca Raton PC
Remove				عور ۹ رز
6) Change				
Add				
Remove				

N/A	
in amendment provides for an exchange, re	classification, or cancellation of issued shares,
rovisions for implementing the amendment (if not applicable, indicate N/A)	f not contained in the amendment itself:
(y nor appressive, mateur (471)	Au .
	N/A
	
·	
	<u> </u>

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 document's effective date on the Department of State's records.	will 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)	
☐ 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	
Signature Plan Baol	
(By a director, president or other officer - if directors or officers have not been	·
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
appointed reductary by that inductary)	
(Typed or printed name of person signing)	
(Typed of prince hade of person signing)	
Ireasurev	
(Title of person signing)	