P08000086748

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SECRETARY OF STATE OIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Construction Resources of South Florida, Inc.				
DOCUMENT NUMBER:	P08000086748			
The enclosed Articles of Amendment	and fee are submitted for filing.			
Please return all correspondence cond	erning this matter to the following:			
	AMBAR DIAZ			
	(Name of Contact Person)			
	AMBAR DIAZ, P.A.			
	(Firm/ Company)			
	782 NW 42 AVE SUITE 434			
	(Address)			
	MIAMI FL 33126 (City/ State and Zip Code)			
For further information concerning th				
AMBAR DIAZ	at (<u>305</u>) <u>476-8100</u>			
(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:			
▼\$35 Filing Fee				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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P08000086748		n
(Document Number of Corporati	on (if known)	
uant to the provisions of section 607.1006, Florida Statut wing amendment(s) to its Articles of Incorporation:	es, this <i>Florida Pro</i>	<i>fit Corporation</i> adopt
f amending name, enter the new name of the corporation	<u>n:</u>	
4		
new name must be distinguishable and contain the corporated" or the abbreviation "Corp.," "Inc.," or Co., o". A professional corporation name must contain ociation," or the abbreviation "P.A."	." or the designation	1 "Corp." "Inc," or
Enter new principal office address, if applicable:		<u> </u>
ncipal office address <u>MUST BE A STREET ADDRESS</u>)		
	ţ	
Enter new mailing address, if applicable:		
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		· · · · · · · · · · · · · · · · · · ·
Muiling address MAY BE A POST OFFICE BOX) f amending the registered agent and/or registered office		enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office		enter the name of the
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Muiling address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent:		enter the name of the
Mailing address MAY BE A POST OFFICE BOX) f amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent:	ress:	
Mailing address MAY BE A POST OFFICE BOX) f amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent:	ress:	enter the name of the , Florida
If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent: New Registered Office Address: (Floridal Value of New Registered Agent) Y Registered Agent's Signature, if changing Registered Agent are powered agent. I am for the new registered agent. I am for the new registered agent. I am for the proposition of the new registered agent. I am for the new registered agent.	da street address) (City)	, Florida (Zip Code)
New Registered Office Address: (Floridal New Registered Office Address: (Floridal New Registered Agent's Signature, if changing Registered Agereby accept the appointment as registered agent. I am fition.	da street address) (City)	, Florida (Zip Code) cept the obligations o

· 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) <u>Title</u> <u>Name</u> Address Type of Action VP,D RAFAEL IZQUIERDO Remove MIAMI, FL 33183 ☐ Remove Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption:	-
Effective date if applicable:	_
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendme by the shareholders was/were sufficient for approval.	nt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	emen
"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.	older
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1 1 9 0.9	
Signature & and Sayur	_
(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 courappointed fiduciary by that fiduciary)	
Typed or printed name of person signing)	
(Typed or printed name of persoldsigning)	
President	
(Title of person signing)	