P10000030667

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700176762417

04/22/10--01026--005 **35.00



Amerd News 4-28-10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	Custom Concrete Specialist	s, Inc.
DOCUMENT NU	MBER:	P10000030667	
The enclosed Articl	es of Amendment and fee	are submitted for filing.	
Please return all cor	respondence concerning th	is matter to the following:	
_		Glenn Wessel Name of Contact Person	
	,	vame of Contact Person	
	Custon	Concrete Specialists, Inc.	
		гин <i>ь</i> Сотрапу	
	90	00 Glades Road, #2	
		7 AAAI 635	
· 		oca Raton, FL-33432 City/ State and Zip Code	
		w@bellsouth.net	
For further information	tion concerning this matter		
	Blenn Wessel	at (561)43	86-0281
Name o	of Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check	for the following amount i	made payable to the Florida Depart	ment 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)
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	2

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

eorporation FILED

Custom Con	ncrete Specialists, Inc.		2010 400
(Name of Corporation as cur	rently filed with the Florida D	ept. of State)	- see
P1	1000030667	7	SECRETARY OF ALLAHASSEE, F
	umber of Corporation (if known))	- "MOSEE, F
ursuant to the provisions of section 607.100 mendment(s) to its Articles of Incorporation:			
. If amending name, enter the new name	of the corporation:		
	NA		The new
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or th ame must contain the word "chartered," "pr	he designation "Corp," "Inc," (or "Co". A profes.	sional corporation
17			
Enter new principal office address, if ap			
. <u>Enter new principal office address, if ap</u> Principal office address <u>MUST BE A STRE</u>			_
			_
Principal office address <u>MUST BE A STRE</u>	ET ADDRESS)		
	le:		
Principal office address MUST BE A STRE. Enter new mailing address, if applicable	le:		
Principal office address MUST BE A STRE. Enter new mailing address, if applicable	le:		
Principal office address <u>MUST BE A STRE</u> . <u>Enter new mailing address, if applicable</u> (Mailing address <u>MAY BE A POST OFF</u>)	le:	larida enter the na	ume of the
Principal office address MUST BE A STRE. Enter new mailing address, if applicable	le: FICE BOX) registered office address in F	lorida, enter the na	nme of the
Principal office address MUST BE A STRE. Later new mailing address, if applicable (Mailing address MAY BE A POST OFF) Lift amending the registered agent and/or new registered agent and/or the new reg	le: FICE BOX) registered office address in F	lorida, enter the na	ame of the
Principal office address MUST BE A STRE. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) If amending the registered agent and/or	le: FICE BOX) registered office address in F	lorida, enter the na	nme of the
Principal office address MUST BE A STRE. Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new reg	le: FICE BOX) registered office address in Figistered office address:		ame of the
Principal office address MUST BE A STRE. Later new mailing address, if applicable (Mailing address MAY BE A POST OFF) Lift amending the registered agent and/or new registered agent and/or the new reg	le: FICE BOX) registered office address in F		ame of the
Principal office address MUST BE A STRE. Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new reg	le: FICE BOX) registered office address in Figistered office address:	ress)	nme of the

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
T	Rocco Abate	672 Cypress Green Circle Wellington, FL 33414	☑ Add □ Remove
			1784 <u> </u>
E. If amend (attach ad	ling or adding additional Articles dditional sheets, if necessary). (E	s, enter change(s) here: Be specific)	
<u>provisi</u> c		nge, reclassification, or cancellation of ment if not contained in the amendmen	
-			

The date of each amendment(s) adoption: 4/14/10		
Effective date if applicable:	(date of adoption is required)	
entre date <u>it applicable</u> .	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated 4/14/ Signature	Alwa	
(By a select	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Glenn Wessel	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	