## P10000049579

| (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: |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR                         | RATION: CURRENT CON-                        | CRETE 1 INC   |  |
|--|---|---|--|
|  | P10000049579                                |   |  |
| The enclosed Articles                  | of Amendment and fee are su                 | bmitted for filing.   |  |
| Please return all corres               | spondence concerning this ma                | tter to the following:  |  |
|  | ERIC ERICKSON                               |   |  |
|  |   | Name of Contact Person  | 1  |
|  |   | Firm/ Company   |  |
|  | PO BOX 1528                                 |   |  |
|  |   | Address   |  |
|  | MOORE HAVEN, FL 334                         | 71  |  |
|  |   | City/ State and Zip Code  | e  |
| curre                                  | ntconcrete@yahoo.com                        |   |  |
|  | E-mail address: (to be us                   | sed for future annual report  | notification)  |
| For further information                | n concerning this matter, pleas             | se call:  |  |
| ERIC ERICKSON                          |   | at ( 954  | 638-3046   |
| Name of Contact Person                 |   | at () Area Code & Daytime Telephone Number                                  |  |
| Enclosed is a check fo                 | r the following amount made                 | payable to the Florida Depa   | irtment of State:  |
| ■ \$35 Filing Fee                      | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address                        |   |   | Address  |
| Amendment Section                      |   | Amendment Section   |  |
| Division of Corporations               |   | Division of Corporations  |  |
| P.O. Box 6327<br>Tallahassee, FL 32314 |   | Clifton Building 2661 Executive Center Circle                               |  |

Tallahassee, FL 32301

## Articles of Amendment 10

## Articles of Incorporation

of

| CURRENT | CONCRETE | LINC |
|---------|----------|------|
|---------|----------|------|

| (Name of Corporation as curren   | ntly filed with the Florida Dept. of State)   |
|--|---|
| P10000049579   |   |
| (Document Number   | of Corporation (if known)   |
| Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:   | is Florida Profit Corporation adopts the following amendment(s)   |
| A. If amending name, enter the new name of the corporation:  |   |
| <b>\1</b>  | A The new   |
| name must be distinguishable and contain the word "corporat<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or<br>word "chartered," "professional association," or the abbreviation | tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A." |
| 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: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )  | NIA PROPERTY OF THE D   |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre  | Idress in Florida, enter the name of the  |
| Name of New Registered Agent   | NA  |
|  |   |
|  | street address)   |
| M  |   |
| New Registered Office Address:   | , Florida   |
|  | .,,   |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian  |   |
| 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          | <u>PT</u>    | John Doe       |                          |
|----------------------------|--------------|----------------|--------------------------|
| X Remove                   | <u>v</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            | James F. Poole | 1748 NW 29th Way         |
| X Add                      |              |                | Ft. Lauderdale, FL 33311 |
| Remove                     |              |                | -                        |
| 2) Change                  |              |                |                          |
| Add                        |              |                |                          |
| Remove                     |              |                | <del></del>              |
| 3 ) Change                 |              |                |                          |
| Add                        |              |                | <del></del>              |
| Remove                     |              |                |                          |
| 4) Change                  |              |                | -                        |
| Add                        |              |                |                          |
| Remove                     |              |                |                          |
| 5) Change                  |              |                |                          |
| Add                        |              |                |                          |
| Remove                     |              |                |                          |
| 6) Change                  | <del></del>  |                |                          |
| Add                        |              |                |                          |
| Remove                     |              |                |                          |

| ach additional sheets, if necessary). (Be                                       |  |
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| d   | and a second second second second second   |
| n amenument provides for an exchange<br>ovisions for implementing the amendment | e, reclassification, or cancellation of issued shares,<br>nent if not contained in the amendment itself: |
| (if not applicable, indicate N/A)   | intermed to the amendment them   |
|   | NIA  |
|   | N/H  |
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| The date of each amendment(s)  | adoption:   | , if other than the               |
|--|---|-----------------------------------|
| date this document was signed.   |   |                                   |
| Effective date <u>if applicable</u> :                                      |   |                                   |
|  | (no more than 90 days after amendment file date)  |                                   |
| <b>Note:</b> If the date inserted in this document's effective date on the | s block does not meet the applicable statutory filing requirements, the Department of State's records.  | is date will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )  |                                   |
| ■ The amendment(s) was/were a by the shareholders was/were                 | adopted by the shareholders. The number of votes cast for the amendm sufficient for approval.   | ent(s)                            |
|  | approved by the shareholders through voting groups. The following stator each voting group entitled to vote separately on the amendment(s):   | tement                            |
| "The number of votes ca  | ist for the amendment(s) was/were sufficient for approval   |                                   |
| by   | (voting group)  |                                   |
| <b></b>  |   |                                   |
| action was not required.   | idopted by the board of directors without shareholder action and shareh   | older                             |
| ☐ The amendment(s) was/were a action was not required.                     | idopted by the incorporators without shareholder action and shareholde  | ı                                 |
| Novemb<br>Dated  | per 29, 2018  |                                   |
| Signature  | Ceni Cenilie  |                                   |
| (By a selec  | a director, president or other officer – if directors or officers have not be<br>sted, by an incorporator – if in the hands of a receiver, trustee, or other<br>sinted fiduciary by that fiduciary) |                                   |
|  | Eric Erickson   |                                   |
|  | (Typed or printed name of person signing)   |                                   |
|  | President   |                                   |
|  | (Title of person signing)   |                                   |