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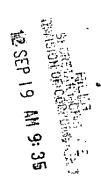
(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT .	MAIL.
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Southern Asphalt Solutions, Inc.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Huggins Name of Contact Person
15632 100th Lane North Mest Palm Reach, Fl. 33412
City/ State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David Huggins == (561) 248-0005
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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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. Articles of A	mendment	WATSTON OF THE PERSON OF THE P
to Articles of Inc	orporation	PSEP, CONCE
· Southern Asphalt S	colutions, Inc	PE SEP 19 AM 9:35
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
(Document Number of Corporation (i	f known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the corporation: SOUTHON COATING SOUTHO name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or " word "chartered," "professional association," or the abbreviation"	'Co". A professional corporation	The new d" or the abbreviation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	15632 100th L West Palm Be	ane North ach F1. 33412
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15632 100th La West Palm Beac	ne North h, F1. 33412
D. If amending the registered agent and/or registered office adding new registered agent and/or the new registered office address		f the
Name of New Registered Agent (Florida str	reet address)	
New Registered Office Address:(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if Changing Registered Agent I hereby accept the appointment as fegistered agent. If am familiar to the signature of New Pagistered Signature of New Pagistered		the position

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:

 $P \Rightarrow President; V=Vice President; T=Treasurer; S=Secretary; D=Director; TR=Trustee; C=Chairman or Clerk; CEO=Chief Executive Officer; CFO=Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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.

	e, and Saity Smith, SF as an Ada.	
Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	VP David Huggins	15632 100th Lang North
Add	30	West Palm Beach, Fl. 33412
Remove		
2)Change	P Trany Huggins	15632 100th Lane North West Palm Beach, F1 33412
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

(Attach	HUHIE OF AUGINE AU	ditional Article	s, enter change(s) here:
	additional sheets, if		Be specific)
<u> </u>	10 17'		
·			
		·	
			
If an g	amendment provide	s for an exchan	ge, reclassification, or cancellation of issued shares,
provi	isions for implemen if not applicable, ind	ting the amend	ment if not contained in the amendment itself:
($\lambda + \Delta$	<i>neare</i> 1071)	
	N I N		
	1/ / /		

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 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 Sept 17, 2012
Signature Lacy Huggm
(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)
(Typed or printed name of person signing)
President
(Title of person signing)