P11000028717

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #	f)
PICK-UP WAIT	MAIL
(Business Entity Name)
(Document Number)	
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05/13/11--01020--001 **35.00

Amend



115-20-11

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: _	Precast Manufacturing of Medley, Inc.	
DOCUMENT NUMBER:	P11000028717	
The enclosed Articles of Amendm	nt and fee are submitted for filing.	
Please return all correspondence c	ncerning this matter to the following:	
	G. Frank Quesada, Esquire	
	Name of Contact Person	
	Law Offices of G. Frank Quesada	
	Firm/ Company	
1313 Ponce de Leon Blvd., Suite 200		
Address Coral Gables, Florida 33134		
E-mail add	gfq@quesadalaw.net	
For further information concerning	this matter, please call:	
G. Frank Quesa		
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the follow	g amount made payable to the Florida Department of State:	
✓ \$35 Filing Fee		
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of	TI MAY IS
Precast Manufacturing of Medley, Inc.	M 2:09
(Name of Corporation as currently filed with the Florida Dept. of State	MASSICATE ST
P11000028717	
(Document Number of Corporation (if known)	

llowing

ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pro	e designation "Corp," "Inc	," or "Co". A professional corporat
B. Enter new principal office address, if app		Mark Mark Control of C
Principal office address <u>MUST BE A STREE</u>	<u>:T ADDRESS</u>) 	
Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFFI</u>	<u>(CE BOX</u>)	
. If amending the registered agent and/or i	registered office address ir	n Florida, enter the name of the
new registered agent and/or the new regi	stered office address:	
Name of New Registered Agent:		
_		
New Registered Office Address:	(Florida street a	ddress)
New Registered Office Address:	(Florida street a	ddress), Florida (Zip Code)

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
P/S/T	Diana Q. Lista	11002 NW South River Drive Medley, Florida 33178	_ ☑ Add _ □ Remove
			_
			_
F. Ifan an	nendment provides for an exchange	reclassification, or cancellation of is	suad shares
<u>provisic</u>	ons for implementing the amendmen of applicable, indicate N/A)	t if not contained in the amendment	itself:
 			
			- 1-1-1-1-1

The date of each amendment	(a) adaption: $5-12-11$
The date of each amendment	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	east for the amendment(s) was/were sufficient for approval
by	"
,	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_05/1	2/11
Signature	Dianadista
selec	a director, president or other officer - if directors or officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Diana Q. Lista
	(Typed or printed name of person signing)
	President
	(Title of person signing)