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(City	/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:Asphalt Milling	s Inc.	
DOCUMENT NUM	BER:P11000063364		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Cary Williams		
		Name of Contact Person	n
	Asphalt Millings Inc		
		Firm/ Company	·
	17710 US Hwy 41		
		Address	
	Spring Hill, FL 34610		
		City/ State and Zip Cod	e
wil	liamsmainoffice@gmail.com		
		sed for future annual report	notification)
	on concerning this matter, pleas		
Teresa Brown		at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dept	irtment of State:
S35 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 P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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Asphalt Millings Inc	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
	20
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
Π <i>I</i> A	The new
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 name must contain the 🥏
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address. Name of New Registered Agent Agent	
'	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	ST	Bonnie Williams	20953 SR 52
X Add			Land O Lakes, FL 34637
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary).	(ве ѕресінс)			
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If an amendmen	t provides for an excl	hange, reclassifica	tion, or cancellatio	n of issued shares,	
provisions for i	t provides for an excl mplementing the ame cable, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellation	n of issued shares, dment itself:	
provisions for i	mplementing the ame cable, indicate N/A)	hange, reclassifics endment if not con	tion, or cancellation tained in the amen	n of issued shares, dment itself:	
provisions for i (if not appli almadge C Willia	mplementing the ame cable, indicate N/A) ms - 49% shares	hange, reclassifica endment if not con	tion, or cancellation tained in the amen	n of issued shares, dment itself:	
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provisions for i (if not appli almadge C Willia	mplementing the ame cable, indicate N/A) ms - 49% shares	hange, reclassifics endment if not con	ition, or cancellation tained in the amen	n of issued shares, dment itself:	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
in applicative.	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	e 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 east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
10/15/1 Dated	8	
selec	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court printed fiduciary by that fiduciary)	
	Talmadge C Williams	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	