/110000 12801

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(Address)
(Address)
(City/State/Zip/Phone #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: REGAL CONCR	ETE SERVICES INC	
DOCUMENT NU	MBER: P11000072801		
The enclosed Artico	les of Amendment and fee are s	 ubmitted for filing.	
Please return all con	rrespondence concerning this ma	atter to the following:	
	JOSE PINA		
		Name of Contact Perso	on
	REGAL CONCRETE SERV	ICES INC	
		Firm/ Company	
	11675 LADYBUG LANE		
		Address	
	NAPLES FL 34114		
		City/ State and Zip Coc	le
_	alconcrete@gmail.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
JOSE PINA		239	285-9175
Nam	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)
Ar Di P.(ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

REGAL CONCRETE SERVICES INC.

MEGAL CONCRETE SERVICES INC	<u>.</u>				
(Name of Corporation P11000072801	as currently filed with the Fl	orida Dept. of State)		
					
	it Number of Corporation (if kn				
ursuant to the provisions of section 607.1006, Florida St s Articles of Incorporation:	tatutes, this Florida Profit Corp	poration adopts the fi	ollowir	ig ameno	lment(s)
. If amending name, enter the new name of the corpo	oration:				
				The ,	ten.
ame must be distinguishable and contain the word ' Corp.," "Inc.," or Co.," or the designation "Corp," ' ord "chartered," "professional association," or the abb	"Inc." or "Co" A profession	r "incorporated" or val corporation name	the a	hhami'a	· · · · · · · · · · · · · · · · · · ·
B. Enter new principal office address, if applicable:				•	_
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(SS</u>)		(201	
			1	90	
	-		<u> </u>		<u> </u>
Enter new mailing address, if applicable:			: .	_	
(Mailing address MAY BE A POST OFFICE BOX)			1	T	
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	-	<u>_</u>		 _	_ '-> ₁ , ₂ ,2''
			•	8	
If amending the registered agent and/or registered of	affice address in Florida, ante	or the name of the			-
new registered agent and/or the new registered office	ce address:	er the name of the			
Name of New Registered Agent					
Ten segundent sigem					
	(Florida street address)				
New Registered Office Address:		, Florida			
	(City)	, 1 1011da	(Zip C	ode)	-
ew Registered Agent's Signature, if changing Register	red Agent:				
nereby accept the appointment as registered agent. I am	n jamittar with and accept the o	obligations of the pos	ition.		
Signature	e of New Registered Agent, if c	hanaina			

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.

X Change	<u>PT</u>	John Doc	
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>	Address
1) Change	s 	ANTONIO PINA	3531 22ND AVE NE
XAdd			NAPLES FL 34120
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
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	nal sheets,	, if necessai	ry). (Be s	nter change specific)					
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an amendme rovisions for (if not app	<u>implemer</u>	nting the ai	mendment	eclassificati	on, or cance	llation of is amendment	sued shares itself:		

The date of each amendment date this document was signed		, if other than t
Effective date <u>if applicable</u> :	9/27/19	
	(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in ocument's effective date on the	this block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
The amendment(s) was/wer must be separately provide	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder	
9/27/1	9	
DatedSignature	Cipiose Loren M	
(By	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	_
	CLAUDIA LORA	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	