P12000009879

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
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Mary Con

NOV, 2 8, 2012 C. MUSTAIN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ZAMORA (CONCRETE CO	RP
DOCUMENT NUMB	_{ER:} P1200000987	9	
	of Amendment and fee are su		
Please return all corres	pondence concerning this ma	tter to the following:	
	Domingo Abinade	ər	
•		Name of Contact Person	1
	AB Multi Services	and Income Ta	X
		Firm/ Company	
	8751 Commodity	Cir Ste 7	
		Address	
	Orlando, FL 3281	19	
·		City/ State and Zip Code	e
abn	nultiservices1@yl	naoo.com	
	- •	sed for future annual report	notification)
Dan Coult on in Comment		D	
For further information	concerning this matter, pleas	se call:	
Domingo Abi	nader	at (407	, 601-6524
Name o	f Contact Person		de & Daytime Telephone Number
	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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation of

ZAMORA CONCRETE CORP		
(Name of Corporation as currently fi	led with the Florida Dept. of State)	
P12000009879		
· (Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this <i>Florida Profit Corporation</i>	n adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
ZAMORA CONCRETE AND GEI	NERAL LABOR CORP	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	," "Inc," or "Co". A professional corp	orporated" or the abbreviation
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADD</u>	DRESS)	<u>\$</u>
		2
C. Enter new mailing address, if applicable:		S PM
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u> </u>	
		हित्र क्ष
		£ 1
		
D. If amending the registered agent and/or register		name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Flor	ida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg		tions of the monition
I hereby accept the appointment as registered agent.	i am jamiliar wiin ana accept the obliga	tions of the position.

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.

X Change	PT	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		CENDEJAS, EDUARDO	4678 LORI CHRISTINE ST
Add			HAINES CITY FL 33844
X Remove			
2) Change		CENDEJAS, SALVADOR	4678 LORI CHRISTINE ST
Add			HAINES CITY FL 33844
X Remove			
3) Change			
Add			
Remove	•		
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Ađd			
Remove			

	y). (Be specific,	ange(s) here:)		
		11		
		·		
	No.			
				-107
				·
				
				<u></u>
				
		·		
f an amendment provides for an oppositions for implementing the an opplicable, indicate N/A	exchange, reclass amendment if not	ification, or cance t contained in the	ellation of issued s amendment itself	hares,
-			· · · · · · · · · · · · · · · · · · ·	
	<u> </u>			
	·			

The date of each amendment(s)	adoption: 11/15/2012
	1/17/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
_{Dated} 11/17	<u>'/2012</u>
Signature	'lbld 3
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	UBALDO ZAMORA
	(Typed or printed name of person signing)
	President
	(Title of person signing)