Division of Corporations Electronic Filing Cover Sheet

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(((H15000191210 3)))



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Account Number: I20140000004

Phone Fax Number

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN JASON'S CONCRETE AND RESTORATIONS INC.

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AUG 11 2015

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August 10, 2015

## FLORIDA DEPARTMENT OF STATE

JASON'S CONCRETE AND RESTORATIONS INC. 129 ELM ST WEST MELBOURNE, FL 32904

SUBJECT: JASON'S CONCRETE AND RESTORATIONS INC.

REF: P12000019373

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II FAX Aud. #: H15000191210 Letter Number: 915A00016751

## Articles of Amendment to Articles of Incorporation

Articles of Inco	orporation
JASON'S CONCRETE AND RES	STORATIONS INC.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P12000	0019373
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must he distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SECON LANG.
	ess in Florida, enter the name of the
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
Nav Baristanad Office Address	Clasta
New Registered Office Address:((	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Rec	eistered 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	<u>PT</u>	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	D	DEWEES, JASON	737 ESPANOLA WAY			
Add			MELBOURNE, FL 32901			
x Remove			<u></u>			
2) Change	D	KIRK, WILLIAM	1485 37TH STREET			
x Add			APT 209			
Remove			VERO BEACH, FL 32960			
3) Change	<u></u>					
Add						
Remove						
4) Change		_ ·				
Add			-			
Remove						
5) Change			<u></u>			
Add						
Remove						
6) Change		<del>-</del>				
Add			···			
Remove						

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ementing the ame	hange, reclassifi adment if not c	cation, or cance ontained in the	ellation of issued amendment itse	<u>l shares,</u> e <u>lf:</u>	
		,			
-					
l	ovides for an exclementing the ame	ementing the amendment if not c	ementing the amendment if not contained in the	ementing the amendment if not contained in the amendment itse	ovides for an exchange, reclassification, or cancellation of issued shares, tementing the amendment if not contained in the amendment itself:

. . . .

	AUGUST 8, 2015	
The date of each amendment date this document was signed.	•	, if other than the
Effective date if applicable:	AUGUST 8, 2015	
Effective date is applicable.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
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):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
action was not required.	ust 8, 2015	
se	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 liduciary by that fiduciary)	-
ap.	JASON DALZELL	
	(Typed or printed name of person signing)	da A
(	(Title of person signing)	<u>nery</u>