# P13000015065

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

SEP 1 5 2015 T CANNON

#### **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: RT PAVERS CORP P13000015065 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **ARISLEYDIS CRUZ** Name of Contact Person RT PAVERS CORP Firm/ Company 240 NW 107TH AVENUE SUITE 210 Address MIAMI, FL 33172 City/ State and Zip Code mastertax01@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ARISLEYDIS CRUZ Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

### Articles of Amendment to Articles of Incorporation of

#### RT PAVERS CORP

	RTPAV	ERS CORP		
(Name o	f Corporation as current	ly filed with the Florida Dept. of State)		
	P130000	15065		
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following at	nendmer	nt(s) to
A. If amending name, enter the new na	me of the corporation:			
		Th	ie new	
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbr "Co". A professional corporation name must con	eviation	
D. Enternamental office address				
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u> )		MIAMI FL 33174		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11482 SW 5TH TERRACE		
		MIAMI FL 33174		
D. If amending the registered agent an			هبيد	Ξ×s
new registered agent and/or the new	v registered office addres	<u>s:</u>	S S	
Name of New Registered Agent			<u> </u>	
	11482 SW 5TH TERRAG	CE	8	SS
	(Florida si	reet address)	PH	
New Registered Office Address:	MIAMI	. Florida <sup>33172</sup>	 C-3	
new negaticies. Office musicos.		(City) (Zip Cod	e)	SE
			5	징
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen ered agent. I am familiar	t: with and accept the obligations of the position.		
<del> </del>	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)

Remove

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: 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>	Name	Address
1) Change	<u>s</u>	IGNACIO CARBALLO	240 NW 107 AVENUE SUITE 210
Add X Remove			MIAMI, FL 33172
2) Change	S	YUNIESKY CRUZ	11482 SW 5TH TERRACE
X Add			MIAMI, FL 33172
Remove 3) Change	Т	REINIER GARCIA	11041 NW 4TH TER
Add			MIAMI, FL 33172  MIAMI, FL 33172  240 NW 107 AVENUE SUITE 216
Remove 4) Change	т	ROBERTO ORTIZ	240 NW 107 AVENUE SUITE 210 F
Add			MIAMI, FL 33172 29 20 20 20 20 20 20 20 20 20 20 20 20 20
Remove  5) Change	s	ANGEL L VELAZQUEZ II	16931 NW 52ND AVE
Add			MIAMI GARDENS, FL 33055
X Remove			
6) Change	THE STATE OF THE S		
Add			

(Attach additional sheets, if necessary). (Be specific)		
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	5	TATE ORIDA
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)		مر
	<del></del>	

•	09/03/15	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	03/15	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	plock does not meet the applicable statutory filing requirements, this date will epartment of State's records.	l not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	7.5. 1.5.
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	SEP
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	ARY OF
09/03/15	_	ာ့ ျိုး
DatedSignature		ATE PRIDA
(By a c	lirector, president or other officer - if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)	
	ROBERTO ORTIZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del> </del>