P13000046402

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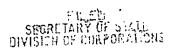
AUG 4 2015 CLEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: A TO Z CONCRE	ГЕ		
DOCUMENT NUMB	ER: P130010046402			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Lee Rossman			
-	Name of Contact Person			
		Firm/ Company		
	PO Box 757			
	Eastmains El 2222	Address		
	Eastpoint, FL 32328 City/ State and Zip Code			
		City/ blate and zap cod		
leeros	sman@live.com	16 6		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Lee Rossman		at (⁸⁵⁰	661-2995	
Name 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)	
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



A TO Z CONCRETE INC

15 AUG -3 PM 1: 40

(Name	of Corporation as current	ly filed with the Florida Dept. of State)
p13000046402		
	(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
NA		The new
	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address.	if annlicable:	NA
(Principal office address MUST BE A S	TREET ADDRESS)	
C. Enter new mailing address, if appl	icable:	NA
(Mailing address MAY BE A POST	OFFICE BOX	NA
D. If amending the registered agent at new registered agent and/or the ne		
	NA	
Name of New Registered Agent		
	ari d	
	NA	reet address)
New Registered Office Address:	1171	(City) (Zip Code)
		(Const)
New Registered Agent's Signature, if c		
I hereby accept the appointment as regis	tered agent. I am familiar	with and accept the obligations of the position.
	Signature of Man	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 <math>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 Jo	hn Doe	
X Remove	Y M	like Jones	
X Add	SV Sa	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	SV	FAVIOLA JIMENEZ	2888 MICHIGAN ST
X Add			SARASOTA, FL 34237
Remove			
2) Change	<u>v</u>	LEE ROSSMAN	PO BOX 757
X Add			EASTPOINT, FL 32328
Remove			
3) Change			788-00-0-0
Add			
Remove			
4) Change	<u></u>	***	
Add			
Remove			
5) Change	*******************		
Add			
Remove			
6) Change		·	
Add			
Remove			

A	ing or adding additional Additional Additional sheets, if necessary	y). (Be specific)			
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provisio	endment provides for an eons for implementing the anotapplicable, indicate N/A	<u>mendment if not c</u>	cation, or cancellat ontained in the am	ion of issued shares, endment itself:	
(if r					
(if r					
(if r					
(if r					
(if r					
(if r					
(if r					
(if r					
(if r					
(if r					

The date of each amendment(s) adoption:	en, if other than the
date this document was signed.	SECRETARY OF STATE DIVISION OF CURPORATIONS
Effective date if applicable:	
(no more than 90 days after amendment file do	ue) 15 AUG - 3 PM 1: 40
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the a by the shareholders was/were sufficient for approval.	mendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action an action was not required.	d shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	areholder
JULY 26, 2015	
Dated	
.4 - 11 -	
Signature / sould A fine NES	
By a director, president or other officer if directors or officers ha	
selected, by an incorporator - if in the hands of a receiver, trustee,	or other court
appointed fiduciary by that fiduciary)	
ADOLFO JIMENEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	