## P130000 48189

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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TO: Amendment Section

Division of Corporations

|  | Doke Roncieta jinish cop<br>P13/10004 8/189  |
|--|--|
| The enclosed Articles of Amendment and fee are su      | bmitted for filing.  |
|  |  |
| Please return all correspondence concerning this ma    | tter to the following:   |
| Oscar C  | Name of Concast Person   |
|  | Name of Concept Person   |
| South Dode   | Cenerale finish corp   |
|  | Firm/ Company  |
| 3711 Sw  | Dr Avenue  |
| Mini .   | 1. Address<br>1. 33175   |
| <u> </u>   | City/ State and Zip Code   |
|  | City State and Zip Code<br>Le yaho, com  |
| OSCATCONCA   | el yahro, com  |
| E-mail address: (to be us                              | sed for future annual report notification)   |
| For further information concerning this matter, plea   | se call:   |
| Scot Grusale<br>Name of Contact Person                 | at (BOT) 875-06+7  Area Code & Daytime Telephone Number  |
| 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:  |
| \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$ | S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed) |
| Mailing Address  | Street Address   |
| Amendment Section                                      | Amendment Section Division of Corporations   |
| Division of Corporations<br>P.O. Box 6327              | The Centre of Tallahassee  |
| Tallahassee, FL 32314                                  | 2415 N. Monroe Street, Suite 810   |

Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation of

| SOUTH DADE CONCRETE FINISH CORP  | -                           |           |
|--|-----------------------------|-----------|
| (Name of Corporation as currently filed with the Florida Dept. of State)   | Ī                           |           |
| P13000048189   |                             |           |
| (Document Number of Corporation (if known)   | Ī                           |           |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:   | amendm                      | ient(s) t |
| A. If amending name, enter the new name of the corporation:  |                             |           |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A." | The ne<br>Corp.,<br>the wor | **        |
| B. Enter new principal office address, if applicable:  | <u> </u>                    |           |
| (Principal office address MUST BE A STREET ADDRESS)  | 1                           |           |
|  | 029                         |           |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |                             | : ,       |
|  | Pl                          |           |
|  | 1.5                         |           |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  | 38                          |           |
| Name of New Registered Agent   |                             |           |
| (Florida street address)   | ı                           |           |
|  |                             |           |
| New Registered Office Address:   | ulc)                        |           |
|  |                             |           |
| New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.   |                             |           |
| Signature of New Registered Agent, if changing   |                             |           |
| Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.  |                             |           |

| address of each Officer<br>(Attach additional sheets<br>Please note the officer/d<br>P = President; V = Vice<br>Executive Officer; CFO<br>President, Treasurer, Di<br>Changes should be noted | and/or D s. if necess irector titl President = Chief Fi rector wor d in the for aves the ce | irector be<br>ary)<br>e by the fi<br>; T= Trea<br>nancial O<br>uld be PTi<br>llowing me<br>orporation | rst letter of the office title: surer; S= Secretary; D= Director; TR= tflicer. If an officer/director holds more th D. anner. Currently John Doe is listed as the s, Sally Smith is named the V and S. These | Trustee: C = Chairman or Clerk<br>an one title, list the first letter of e<br>e PST and Mike Jones is listed as | CEO = Chief<br>wh office held.<br>the V. There is |
|---|---|---|--|---|---|
| X Change  | <u>PT</u>   | John Do   | <u>c</u>   |   |   |
| X Remove  | <u>V</u>  | Mike Jos  | <u>nes</u>   |   |   |
| X Add   | <u>\$V</u>  | Sally Sm  | <u>rith</u>  |   |   |
| Type of Action (Check One)  | Title   |   | Name   | <u>Addres</u> s   |   |
| 1) Change   | CFO   | ·<br>—  | OSCAR GONNALZ JR   | 3711 SW 122 AU<br>MiAnii, Fl. 33  | cue   |
| X Add   |   |   |  | Mimii, Fl. 33   | 135   |
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| ach additional sheets, if neces                              | sary), (Be specific)      |   |   |             |
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| in amendment provides for a<br>covisions for implementing th | in exchange, reclassifica | ation, or cancellation<br>ntained in the amen | <u>n of issued shares.</u><br>dment itself: |             |
| (if not applicable, indicate i                               | V/A)                      | ntante in the anti-                           | dident toen                                 |             |
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| The date of each amendment(s) adoption: 08/29/3020 date this document was signed.  | , if other than the |
|--|---------------------|
| Effective date if applicable: September 01/2000  (no more than 90 days after amendment file date)  |                     |
| (no more than 90 days after amendment file date)   |                     |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will necessarily document's effective date on the Department of State's records.            | ot be listed as the |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |                     |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.  | narcholder          |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.   |                     |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)   |                     |
| Signature  (By a director, president or other officer – if directors or officers have not been   |                     |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)   |                     |
| (Typed or printed name of person signing)  |                     |
| (Typed of printed name of person signing)  |                     |
| (Title of person signing)  | <del>- </del>       |
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