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SECRETARY OF STATE

JAN 19 2016 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Larry'S Concrete Inc.					
DOCUMENT NUMBER: _ + 15000028265					
The enclosed Articles of Amendment and fee are submitted for filling.					
Please return all correspondence concerning this matter to the following:					
F5Ther J Melendez Name of Contact Person					
Fines of Pinellas					
Firm/ Company					
6447 park Blud ste 6					
Address					
Pinellas Park FL 33781					
City/ State and Zip Code					
E-mail address: (to be used for fluore annual (eport notification)					
E-man address: (to be used for (quite annual (eport not meadon)					
For further information concerning this matter, please call:					
Esther J Melender 11(727, 2897133					
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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32304 **Articles of Amendment** to

FILED 16 JAN 15 PM 6::10

Articles of Incorporation of

Larry's Conc	rete	DO:	7	SECRETARY (TALLAHARSER	IF STATE
(Name of C	orporation as c	urrently filed with	n the Florida De	ept. of State)	+LURIDA -
715000028269					
		umber of Corporation	ən (if known)	-	
Pursuant to the provisions of section 607,1006 its Articles of Incorporation:	6. Florida Statut	es, this <i>Florida Pr</i>	ofit Corporation	adopts the followi	ng amendment(s) to
A. If amending name, enter the new name name must be distinguishable and contain "Corp" "Inc.," or Co.," or the designation word "chartered." "professional association."	the word "corn" "Inc	Pavers poration." "comp "or "Co". A pr	any," or "incor		
B. Enter new principal office address, if an (Principal office address MUST BE A STRE)			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF F	l <u>e:</u> FICE BOX)				
D. If amending the registered agent and/or new registered agent and/or the new registered agent agen			ida, enter the n	ame of the	
Name of New Registered Agent					_
_	(Fle	orida street address)			_
New Registered Office Address:		<u> </u>		Florida	
		(City)		(Zip	Code)

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

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> <u>John I</u>	<u>)oe</u>	
X Remove	<u>V</u> <u>Mike</u> .	lones	
_X Add	<u>SV</u> <u>Sally S</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change Add Remove	P.	Ezequiel Gomez Olguin	2001 Seton Dr Clearwater FL 33763
2) Change Add Remove	YP	Sava Gomez	1367 Tuscola ST Clearusa ter Fl 33756
3) Change Add Remove	Sec	Sara Gomez	1367 Tuscola S Clearubter FL 33756.
4) Change Add Remove	- Additional Control of the Control		
5) Change Add Remove			
6) Change Add			

Attach additional sheets, if no	ecessary). (Be specif.	ie)		
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			<u> </u>	
				
				
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an amendment provides for provisions for implementin	or an exchange, rectas g the amendment if no	sification, or cancel	lation of issued shares	<u>.</u>
(if not applicable, indica	ite N/A)		mendane resear.	
 		~		
- m				1.4
			 	7- V
				···

The date of each amendment(s) adoption: _date this document was signed.	01/01	2016	if other than the
Effective date if applicable:	01/01/	2016 in 90 days after amendment file date)	
	(no more tha	in 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of			this date will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)		
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		The number of votes east for the amend	dment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voting			
"The number of votes cast for the ann	endment(s) was/	were sufficient for approval	
by	roting group)	144	
☐ The amendment(s) was/were adopted by the action was not required.	se board of direct	tors without shareholder action and sha	rcholder
The amendment(s) was/were adopted by th action was not required.	se incorporators v	without shareholder action and sharehol	lder
Dated 12/31/2			
Signature 5Ak	69601	$m \varepsilon 7$	
	corporator – if in	officer – if directors or officers have no the hands of a receiver, trustee, or oth ary)	
	- Dava 1	Gomez.	
	(Typed or print	ed name of person signing)	
	`	$\mathcal{A}_{\mathcal{V}}$	
	(Tit	tle of person signing)	