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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Figos 9	and Junioss Concrete Inc.
DOCUMENT NUMBER: P15000	34497
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Facksonville	Concrete 7 nc.
E-mail_hddress: (to be us For further information concerning this matter, pleas	
Toy Calderon	at (<u>904</u>) <u>322 0399</u> 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:
\$35 Filing Fee Secretificate of Status	□\$43.75 Filing Fee & □\$52.50 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

Figus & Juniors Con	crete Inc. ly filed with the Florida Dept. of State)		
Δ .			
P15 6008	34497		
(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the foll	owing amendment((s) t
A. If amending name, enter the new name of the corporation:			
Figo's Family Concrete	Inc.	✓ The new	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered." "professional association." or the abbreviation	'Co". A professional corporation name n	he abbreviation rust contain the	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA		
		233	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	3 10 T	i [
	- 1		T
	· · · · · · · · · · · · · · · · · · ·		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address			
4.14	<u>-</u>		
Name of New Registered Agent 11/A			
(Florida str	reet address)		
New Registered Office Address: N/A	, Florida		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to		ion.	
NIA			
Signature of New k	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.

Example: X Change	PT John	<u>1)oe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
_X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> </u>		
Add	,		
Remove			· · · · · · · · · · · · · · · · · · ·
2) Change	NA		
Add	/		
Remove	1.		
3) Change	NA		
Add	1		
Remove			
4) Change	NA		
	1		
Remove			-
5) Change	NA		
Add	/		·
Remove			
6) Change	NA		
Add			
Remove			

<mark>If amending or adding additional Arti</mark> Attach <i>additional sheets, if necessary).</i>	(Be specific)
11/4	
The state of the s	
MILE-1958.	
If an amendment provides for an exchange provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
NA	

The date of each amendment(s) adoption: MA	, if other than the
date this document was signed.	
Effective date if applicable: 4-25-18	
Effective date if applicable: 4-45-18 (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 v document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 east 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 and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4-25-18	
Signature Fracti Caldron 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)	
Figodi Calderon (Typed or printed name of person signing)	
President (Title of person signing)	