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	·	Acc#I20160000072	and the second
Name:	Holcim Trac	ding Inc.	
Document #:			
Order #:	16372372		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification:		Country of Destination:	
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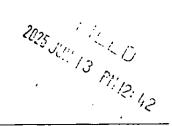
COVER LETTER

TO: Amendment Section Division of Corporations

i e f

NAME OF CORPO	RATION: HOLCIM TRADIN	NG INC.	
DOCUMENT NUMI	BER: P15000097072		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Roxann Kozak		
		Name of Contact Person	1
	Holeim Trading Inc.		
	·	Firm/ Company	
	6509 Airport Road		
		Address	
	Mississauga, ON L4V1S7		
		City/ State and Zip Code	2
	ROXANN.KOZAK@HOLC	IM.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatic	on concerning this matter, pleas		938-9713
	of Contact Person	at (416)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check to	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of



HOLCIM TRADING INC.

(Name of Corporation as currently filed with the Florida Dept. of State)
P15000097072
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
AMRIZE TRADING INC. The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
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:
Name of New Registered Agent
(Florida street address)
Non-Panistanad Office Address: Florida
New Registered Office Address:, Florida
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.

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	<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		_	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

	ding additional Art heets, if necessary).	(Be specific)				
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	provides for an excl	nange, reclassific	ation, or cance	lation of issued s	nares,	
an amendment 1	plementing the ame	<u>inament it not co</u>	ntained in the	amenament usen	<u>•</u>	
provisi <u>ons for im</u>						
an amendment jorovisions for im (if not applica	ine, maicute may					
provisi <u>ons for im</u>	иле, такие голу					
provisi <u>ons for im</u>			-			
provisi <u>ons for im</u>	macue (v.r.)					
provisi <mark>ons for im</mark>						
provisi <mark>ons for im</mark>	ane. maleue (v.r.)					
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provisi <mark>ons for im</mark>	ine. malcue (v.r.)					
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provisi <mark>ons for im</mark>	ine. marcue (v.r.)					

	06/06/2025	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
6/20/ Effective date <u>if applicable</u> :	2025	
Enecute date <u>ir appricusse</u> .	(no more than 90 days after	amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statute partment of State's records.	ory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of dir	rectors without shareholder action and shareholder
The amendment(s) was/were ador by the shareholders was/were sul	oted by the shareholders. The number of ficient for approval.	f votes cast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting each voting group entitled to vote separa	ggroups. The following statement telly on the amendment(s):
"The number of votes cast t	or the amendment(s) was/were sufficien	t for approval
bv		
	(voting group)	
6/6/2025 Dated	···	
Signature	rector, president or other officer - if dire	ctors or officers have not been
selected	, by an incorporator – if in the hands of a ed fiduciary by that fiduciary)	a receiver, trustee, or other court
	ROXANN KOZAK	
	(Typed or printed name of pe	rson signing)
	ASSISTANT SECRETARY	

(Title of person signing)