16 000051845

(Re	questor's Name)	
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S. PRATHE:

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Q AND Q CONC	CRETE INC			
DOCUMENT NUMBER: P16000051845	···			
The enclosed Articles of Amendment and fee are s	submitted for filing.			
Please return all correspondence concerning this m	natter to the following:			
QUINCEY CLAFT				
Q AND Q CONCRETE IN	Name of Contact Person O AND O CONCRETE INC			
<u> </u>	Firm/ Company			
206 GEESE STREET				
	Address	···		
AVON PARK FLORIDA 3	3825			
	City/ State and Zip Cod	e		
michaelq@roofcore.com				
E-mail address: (to be	used for future annual report	notification)		
For further information concerning this matter, ple	ease call:			
MICHAEL QUIGLEY	at (⁸⁶³	441-0050		
Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made	e payable to the Florida Dep	artment of State:		
■ \$35 Filing Fee	□\$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	Amend Division The Co 2415	Address Idment Section on of Corporations Identre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

Q AND Q CONCRETE INC	. •
(Name of Corporation as currently fi	led with the Florida Dept. of State)
P16000051845	•
(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendm
A. If amending name, enter the new name of the corporation:	
	The nev
name must be distinguishable and contain the word "corporation," "com "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A po "chartered," "professional association," or the abbreviation "P.A."	pany," or "incorporated" or the abbreviation "Corp.,
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 new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address
New Registered Office Address: (Cit	y) , Florida (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

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)

Example:

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>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	SEC	LEROY CLAITT	822 LEMON AVE
X Add			SEBRING FL 33870
Remove			
2) Change	VP	EUGENE JOHNSON	1200 S ATLANTIC AVE
Add			AVON PARK FL 33825
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			· -
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

attach additional she	ets, if necessary).	cles, enter change(s) l (Be specific)			
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	···			<u>. </u>	
an amendment pro	ovides for an exch	ange, reclassification, ndment if not contain	or cancellation of iss	sued shares,	
(if not applicable	e, indicate N/A)	BUNIERI H HOL CORRAIN	ea in the smenamen	itsen.	
			· · · · · · · · · · · · · · · · · · ·		-
		***************************************		*	

	8/18/2022	
The date of each amendment(s) adoption	1:	_, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date will ent of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted by action was not required.	y the incorporators, or board of directors without shareholder action and	shareholder
i e	y the shareholders. The number of votes cast for the amendment(s) t for approval.	
must be separately provided for each v	by the shareholders through voting groups. The following statement of our group entitled to vote separately on the amendment(s): amendment(s) was/were sufficient for approval	2022 AUE 24 AH 10: 2
by		
,	(voting group)	1,24
	Λ	
8/18/2022	1 2/4	
Dated	<i>/_/_/</i> X	5 G
Signature	$\mathcal{A} = \mathcal{A} = \mathcal{A}$	÷. 2
(By a director,	president or other officer - if directors or officers have not been	_
selected, by ar	incorporator if in the hands of a receiver, trustee, or other court	
appointed fidu	iciary by that fiduciary)	
QUIN	CEY CLAITT	
	(Typed or printed name of person signing)	
PRES	IDENT	
	(Title of person signing)	