P17coca4670

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: Calzada's Concrete	e Inc.			
	1BER: P17000024670				
	s of Amendment and fee are su	abmitted for filing.			
Please return all corr	espondence concerning this ma	itter to the following:			
	Paulino Gonzalez Calzadad				
		Name of Contact Person	n		
	Calzada's Concrete Inc.				
		Firm/ Company			
	8509 Mary Ivy Dr.				
		Address			
	Plant City, FL 33567				
		City/ State and Zip Cod	e		
calz	adasconcrete@gmail.com				
		sed for future annual report	notification)		
		ou ioi initali amiliaa iopoli	nounce non		
For further informati	on concerning this matter, pleas	se call:			
Paulino Gonzalez Calzada		at (⁸¹³	7647768		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$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			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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	01	2017 DEC -8 PM 4: 5
Calzada's Concrete Inc.		2011 02.0 0 111 4-3
(Name of Corporat	ion as currently filed with the Flori	da Dept. of State)
P17000024670		en e
(Document)	ment Number of Corporation (if know	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corpor	cation adopts the following amendment(s)
A. If amending name, enter the new name of the c	orporation:	
name must be distinguishable and contain the wo. "Corp.," "Inc.," or Co.," or the designation "Corp.	o," "Inc," or "Co". A professional	
word "chartered," "professional association," or the	: abbreviation "P.A,"	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or registenew registered agent and/or the new registered		the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Res I hereby accept the appointment as registered agent.		ligations of the position.
Sim	nature of New Registered Agent, if cha	maina
Sign	iaiai e oj iren negaierea ngem, ij Cili	யதாத

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 Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	Leobardo Gonzalez Calzada	8509 Mary Ivy Dr.	
X Add			Plant City, FL 33567	
Remove				
2) Change	CEO	Ernesto Gonzalez Calzada	8509 Mary Ivy Dr.	
X Add			Plant City, FL 33567	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
Kemove				
6) Change				
Add				
Remove				

E. <u>If amo</u> (Attacl	ending or adding additional Articl h additional sheets, if necessary).	les, enter change((Be specific)	s) here:			
	N/A		- ·			
						
				. .		
			· -			
			-			
				· · · <u>·</u>		
			 			
						
				_		_
	· · · · · · · · · · · · · · · · · · ·					
provi	amendment provides for an exchains is in a mention of the amence of the	nge, reclassificati Iment if not conta	on, or cancellatio ained in the amen	n of issued shares dment itself:	خ	
	N/A					
	,,,					
						•

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file a	late)
Note: If the date inserted in this block does not meet the applicable statutory filing requiren document's effective date on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amend	
"The number of votes cast 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 ar action was not required.	nd shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shaction was not required.	areholder
December 4, 2017 Dated	
Signature Tour	
(By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
Paulino Gonzalez Calzada	
(Typed or printed name of person signing)	
President	
(Title of person signing)	