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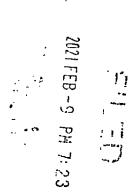
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MAR 31 2021 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ASSOCIATE CON	NSTRUCTION CORP
DOCUMENT NUMBE	P170000	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.
Please return all correspo	ondence concerning this ma	tter to the following:
		ELIO A RIQUENES
		Name of Contact Person
	ASS	OCIATE CONSTRUCTION CORP
_		Firm/ Company
		2942 NW 94TH ST
_		Address
		MIAMI, FL 33147
_		City/ State and Zip Code
		ssbfinancial@gmail.com
_	E-mail address: (to be us	ed for future annual report notification)
	concerning this matter, pleas A Bedrinana	se call: at () 680-9443
Name of	Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Department of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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)
Ameno Divisio P.O. B	ng Address Idment Section on of Corporations ox 6327 assee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ASSOCIATE CONSTRUCTION CORP

(Name of Corporation as of	<u>currently filed wi</u>	th the Florida Dep	t. of State)			
	P17000088313					
(Document No	umber of Corporat	tion (if known)				_
Pursuant to the provisions of section 607,1006, Florida Statutits Articles of Incorporation:	tes, this <i>Florida P</i> .	rofit Corporation ac	dopts the foll	lowing	amendmen	t(s) t
A. If amending name, enter the new name of the corpora	ıtion:					
ASSOCIATE TRANSPORT CO					The new	
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc." or " "chartered," "professional association," or the abbreviation	'Co". A professi	or "incorporated" onal corporation n	or the abbre ame must c	viation	1 "Corp., "	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	<u></u>					
					2112	
			· · ·			! !
C. Enter new mailing address, if applicable:			-	•	i goi I	
(Mailing address MAY BE A POST OFFICE BOX)			•		ف	
				. 12	<u> </u>	1 2
				:	7: 2	نن
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office:		orida, enter the nar	ne of the		ω	
Name of New Registered Agent						
Hane of hear registered rigers			-			
	lorida street address					
New Benistand Office Address		,	EL 11			
New Registered Office Address:	(City)		, Florida	(Zip Ce	ode)	
				-		
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	<u>d Agent:</u> amiliar with and a	ccept the obligation	s of the posit	tion.		
Circums	of Manu Parsiana	Agent, if changing				
Signature of	y new negisierea .	ageni, ij 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.

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>	<u>Name</u>			<u>Addres</u> s	
1) Change			 	_		
Add						
Remove						
2) Change			 	_		
Add						
Remove Change	<u>-</u>					
Add						
Remove						
4) Change			 			
Add						
Remove						
5) Change				_		-
Add			-	_		
Remove						
6) Change						
Add				_		
Remove						

	litional sheets, i	dditional Artic if necessary).	(Be specific	:)				
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provisions				Containto	m the amendme	nt itself:		

· . ·

The date of each amendment(s) ad	option:	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amen	dment file date)
Note: If the date inserted in this blo document's effective date on the Dep		ing 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.	nted by the incorporators, or board of directors	without shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes ficient for approval.	cast for the amendment(s)
	roved by the shareholders through voting group each voting group entitled to vote separately or	
"The number of votes cast f	or the amendment(s) was/were sufficient for a	pproval
by	(voting group)	"
	(voting group)	
selected	ector, president or other officer f if directors of the hands of a received fiduciary by that fiduciary)	
	ELIO A RIQUENES	
-	(Typed or printed name of person si	gning)
	(This of person signing)	

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