P170000 94484

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JUL 1 2 2019 C Kinsey

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: PRECISION CON	CRETE SERVICES GROU	JP. INC.		
DOCUMENT NUM	BER: P17000094484				
	of Amendment and fee are su	ibmitted for filing.			
Please return all corre	spondence concerning this ma	itter to the following:			
	GREG K GONZALEZ				
		Name of Contact Person	n		
	GREG K GONZALEZ, CPA PA				
		Firm/ Company	<u> </u>		
	7900 OAK LANE SUITE 40	, ,			
	Address				
	MIAMI LAKES, FL 33016				
		City/ State and Zip Cod	e		
GRE	G@GGCPACO.COM				
	-	sed for future annual report	notification)		
For further informatio	n concerning this matter, plea	se call:			
GREG K GONZALEZ		305 at (342-3760		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 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 Amendment Section Division of Corporations P.O. Box 6327		Ameno Divisio	Address Iment Section on of Corporations i Building		
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PRECISION CONCRETE SERVICES GROUP, INC.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P17000094484	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	TI
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	5313 SW 153RD PL S
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33185
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5313 SW 153RD PL S
···	MIAMI, FL 33185
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Elemida)	tro t suble see
New Registered Office Address:	treet address), Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Cimate and P.Mare	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	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		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				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
···········	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	•	
·	27/2019	
Effective date if applicable:	tno more than 90 days after amendment file	dates
	ino nun e inan 50 aays after amenameni jue	ant)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing require epartment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the ufficient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The foliogreach voting group entitled to vote separately on the amen	
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
-	(voting group)	
☐ The amendment(s) was/were action was not required.	opted by the board of directors without shareholder action :	and shareholder
☐ The amendment(s) was/were action was not required.	opted by the incorporators without shareholder action and s	hareholder
06/27/201	9	
Dated		
1	- i- 1	
Signature Z	ander Cartmed	
	director, president or other officer - if directors or officers I	
	ed, by an incorporator – if in the hands of a receiver, trustee ited fiduciary by that fiduciary)	, or other court
аррия	ned fiduciary by that fiduciary)	
	CARLOS CASTANEDA	
	(Typed or printed name of person signing)	······································
	VP	
	(Title of nerson signing)	