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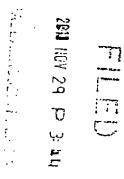
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| Special Instructions to | Filing Officer: | · |
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Office Use Only



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COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPOR | ATION: QUESADA GRA | NITE SERVICES, INC | |
|--|---|--|--|
| DOCUMENT NUMB | ER: P18000036732 | | |
| | of Amendment and fee are su | ubmitted for filing. | |
| Please return all corresp | pondence concerning this ma | atter to the following: | |
| | SI | ERGIO F QUESADA ESQU | JIVEL |
| - | · · · · · · · · · · · · · · · · · · · | Name of Contact Person | 1 |
| - | | Firm/ Company | |
| | : | 5972 34TH AVE NORTH | |
| - | | Address | |
| _ | ST P | ETERSBURG FLORIDA | 33710 |
| | | City/ State and Zip Cod | e |
| | | NONE | |
| | E-mail address: (to be u | sed for future annual report | notification) |
| For further information | concerning this matter, plea | se call: | |
| SERGIO F QUESAD | A ESQUIVEL | at (| 222-7792 |
| Name o | f Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | 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 Tallahassee, FL 32314 | | Amend Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

FILED

to

| QUESADA GRA | ANITE SERVICES, INC | |
|---|--|-----------------------|
| (Name of Corporatio | n as currently filed with the Florida Dept: of S | ate) 3: 25 |
| | 8000036732 | 1 m 3- 45 |
| (Docume | ent Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation: | | |
| A. If amending name, enter the new name of the cor | rporation: | |
| | | The new |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the a | " "Inc," or "Co". A professional corporation n | " or the abbreviation |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of | | <u>he</u> |
| Name of New Registered Agent | | |
| | (Florida street address) | |
| New Registered Office Address: | . Flori | da |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I | | e position. |
| Signa | ture of New 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 Doe | |
|-------------------------------|--------------------------|---------------------|------------------------|
| X Remove | $\underline{\mathbf{V}}$ | 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 | S | JOSE M ALBIZA BRITO | 5972 34TH AVE N |
| X Add | | | ST PETERSBURG, FLORIDA |
| Remove | | | 33710 |
| 2) Change | | _ | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Adá | | | - |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | <u> </u> | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | - | |
| Remove | | | |

| (Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
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| If an amendment provides for an exch | nange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer | ndment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
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| The date of each amendment(s) adoption: | , if other than the |
|--|---------------------------------------|
| date this document was signed. | |
| Effective date <u>if applicable</u> : | |
| (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records. | te will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval. |) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s): | nt |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" | |
| by" (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required. | г |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| 11/14/2018 | |
| Signature Dirgio Esquiul Quinada | |
| (By a director) president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other counappointed fiduciary by that fiduciary) | |
| SERGIO F ESQUIVEL QUESADA | |
| (Typed or printed name of person signing) | · · · · · · · · · · · · · · · · · · · |
| PRESIDENT | |
| (Title of person signing) | |