## P18000045034

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	, 
(Ci	ty/State/Zip/Phone #	<del>)</del>
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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SECRETARY OF STATE
BIVISION OF CORPORATISE

MAY 25 2018 C ichalia

## **COVER LETTER**

Division of Corporations TAMPA Concrete Solutions NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State; \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed).

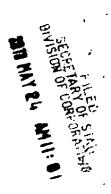
Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(Additional Copy is enclosed)



## Articles of Amendment

	to Articles of Incorporation	n	· ·
<u>~</u> .	of		
1AMPA	CONCRETE	= SOLUTIONS	NC ;
		h the Florida Dept. of State	2)
<u> </u>	00045 034		-
(Doct	iment Number of Corporati	on (if known)	
rsuant to the provisions of section 607,1006, Flori Articles of Incorporation:	da Statutes, this <i>Florida Pr</i>	rofit Corporation adopts the	following amendment(s)
If amending name, enter the new name of the	corporation:		
			The new
me must be distinguishable and contain the wa 'orp ," "Inc.," or Co.," or the designation "Cor and "chartered." "professional association," or th	p. " "Inc, " or "Co". A pi	oany," or "incorporated" o rofessional corporation nam	r the abbreviation ie must contain the
Enter new principal office address, if applicab rincipal office address <u>MUST BE A STREET AD</u>			<del></del>
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u>0X</u> )		<del></del>
	<u></u>	<del></del>	
	·		
If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered		rida, enter the name of the	
None and Many Burist made to say	· · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent	······································	<del></del>	<del></del> -
	(Florida street address)		
	ii iiyina xireei adarexxy	'	
New Registered Office Address:	tCity)	, Florida_	(Zip Code)
w Registered Agent's Signature, if changing Re	gistered Agent:		
ereby accept the appointment as registered agent.	I am familiar with and ac	vept the obligations of the pe	isition.

Signature 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:

 $P-President;\ V-Vice\ President;\ V-Vice\ Pr$ 

Changes should be noted in the following minner: 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>1'T</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>	Address
1) Change	<u> </u>	Francisco Lopez Medin	a 7204 N Cameran Ave TAMPA FL 33614
Add Remove			14mpA FL 33614
21 Change Add	P	Angela Almeida	7204 N Cameron Ave Tampa, FL 33/e14
Remove 3 + Change			
Add			
4) Change			
Remove			
Add			
6) Change			
Add			

	(Be specific)
<del>-</del>	
<del>-</del>	
<del></del>	<del></del>
an amendment provides for an exci-	ange reclassification or eancollation of issued shows
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
an amendment provides for an excinorovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
rovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(	i) adoption:	5/21/18		it other than th
date this document was signed.  Effective date if applicable:	5/21	118		
Elective date it applicante.	the more	than 90 days after amend	iment file date)	<del></del>
Note: If the date inserted in the document's effective date on the	is block does not meet the Department of State's reco	applicable statutory tilinds.	ng requirements, this date wil	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE	)		
The amendment(s) was/were by the shareholders was we	adopted by the shareholder e sufficient for approval.	s. The number of votes of	east for the amendment(s)	
☐ The amendment(s) was/were must be separately provided				
"The number of votes	ast for the amendment(s) w	as/were sufficient for app	proval	
by	(voting group)		- 19	
	(voting group)			
The amendment(s) was/were action was not required.	adopted by the board of dir	ectors without sharehold	er action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporator	rs without shareholder ac	tion and shareholder	
Dated	5/21/18			
	41.			
Signature	a director president or other	w officer if directors or	officer have not have	<u> </u>
se!	cted, by an incorporator - i	f in the hands of a receiv	er, trustee, or other court	
аրլ	omted fiduciary by that fidu	iciary)		
		Angela A	tlmeida	
	(Typed or pr	inted name of person sig	ning)	
		Yresider	+ / Dwner	
		Title of person signing)		<del></del>