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| (Req | uestor's Name) | | | |
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| | ☐ WAIT | MAIL | | |
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| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE ALORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: PAVE | RS AS ART | , INC | |
|---|----------------|--|--|
| DOCUMENT NUMBER: P18000045 | | | |
| The enclosed Articles of Amendment ar | nd fee are sul | bmitted for filing. | |
| Please return all correspondence concert | ning this mat | ter to the following: | |
| PEDRINHO RO | DRIGUES | | |
| | | Name of Contact Person | 1 |
| | <u></u> | Firm/ Company | |
| 2835 WINKLER | AVE 204 | | |
| FORT MYERS. | FL 33916 | Address | |
| | | City/ State and Zip Cod | e |
| tropicalpavers@hotmai | l.com | | |
| E-mail addre | ess: (to be us | ed for future annual report | notification) |
| For further information concerning this i | natter, pleas | e call: | |
| Wallace Assis | | at (| _) 628-5220 |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for the following am | ount made p | payable to the Florida Depa | artment of State: |
| ■ \$35 Filing Fee □\$43.75 Fil Certificate | | □\$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, FI. 32314 | | Amend Divisio Clifton | Address ment Section on of Corporations Building (xecutive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PAVERS AS ART, INC.

| (Name of Corpor | ation as currently filed with the Florida Dept. of State) | l | |
|---|--|-------------------|---------------|
| P18000045498 | | | |
| (Doc | cument Number of Corporation (if known) | | - |
| Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation: | rida Statutes, this Florida Profit Corporation adopts the fo | ollowing amend | lment(s) t |
| A. If amending name, enter the new name of the | corporation: | | |
| TROPICAL PAVERS, INC | | The i | <i>iew</i> |
| | vord "corporation," "company," or "incorporated" or orp," "Inc," or "Co". A professional corporation name he abbreviation "P.A." | | |
| B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A | | | ***** |
| | | | _ |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE I</u> | BOX) | | - - |
| | | 72. | _ |
| | | <u>m</u> 9 | |
|). If amending the registered agent and/or regis new registered agent and/or the new register | stered office address in Florida, enter the name of the | 16 16 18 16 16 | 7 |
| Name of New Registered Agent | | | III |
| | | 短い 29 | O |
| | (Florida street address) | 25. 23 | |
| New Registered Office Address: | , Florida | | |
| | (City) | (Zip Code) | _ |
| | | | |
| N B ' | | | |
| New Registered Agent's Signature, if changing R hereby accept the appointment as registered agen | <u>cegistered Agent:</u> t. I am familiar with and accept the obligations of the pos | sition, | |
| • | , | | |
| | | | |
| | ianature 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 | <u>v</u> | Mike Jones | | |
| X Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s | |
| 1) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | | | 2 19 |
| Add | | | | |
| Remove | | | | and the second |
| 3) Change | | _ | | <u> </u> |
| Add | | | | |
| Remove | | | | 部 23 |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | ·· | - | | |
| Add | | | ···· | |
| Remove | | | | |
| 6) Change | | _ | | · · · · · · · · · · · · · · · · · · · |
| Add | | | | |
| Remove | | | | |

| f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific) | | |
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| f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: | 1887 | 16 |
| (if not applicable, indicate N/A) | मिल | 70 |
| | 70 | \(\frac{7}{24}\) |
| | FLORIDA | 23 |
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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, thi document's effective date on the Department of State's records. | is date 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 amendm by the shareholders was/were sufficient for approval. | ent(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust be separately provided for each voting group entitled to vote separately on the amendment(s): | lement |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" (voting group) | |
| (voting group) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareh action was not required. | oolder |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required. | г |
| 08/14/2019 Dated | |
| Signature Codulo Anddraces. | <u> </u> |
| (By a director, president or other officer – if directors or officers have not b selected, by an incorporator – if in the hands of a receiver, trustee, or other | |
| appointed fiduciary by that fiduciary) | |
| PEDRINHO RODRIGUES | ARY C |
| (Typed or printed name of person signing) | |
| PRESIDENTE | 2: 2 ORII |

(Title of person signing)