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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Apex Pavement Services Inc. DOCUMENT NUMBER: P1800046172
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person A Pex Powement Service Inc Firm/ Company (D211 W Scomple Rd Suits 21) Address Curch Spring F1 73045 City/ State and Zip Code E-mail address: (To be used for future annual report notification)
For further information concerning this matter, please call;
Name of Contact Person at (GNU) 817-6059 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301 DIVICION OF LUBBORATH

Articles of Amendment Articles of Incorporation of

Apex Pavement Services	. Inc	
(Name of Corporation as current)	y filed with the Florida Dept. of State)	
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:	, '\ n	
	NA	The new
name must be distinguishable and contain the word "corporation "Corp" "Inc.," or Co.," or the designation "Corp." "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name	the abbreviation must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	- P/A	
		
C. Enter new mailing address, if applicable:	Δ / ω	1. 97
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	10.11	
	 	ANIO:
D. If amending the registered agent and/or registered office addr	ress in Florida, enter the name of the	15. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19.
new registered agent and/or the new registered office address		S
Name of New Registered Agent	1 / A	
(Florida str	eet address)	
New Registered Office Address:	. Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar v		ition.
Signature of New R	egistered 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	PT John I	<u>loc</u>	
X Remove	V Mike.	loneş	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	AS	Raymond Torres Ir	10211 La Scample Rd
Add		9	Suite 211
Remove			Coral Springs, FI 33065
2) Change	.6	Elizabeth Oaly	10211 W. Comple Rd
Add	•	-	Juste 211
Remove			Ceral prings F13065
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional shed	g additional Articles ets, if necessary). (1	s, enter change(s) ne Be specific)	<u>re</u> :		
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f an amendment pro	vides for an exchang	ge, reclassification, o	r cancellation of	issued shares,	
provisions for imple (if not applicable	menting the amendre, indicate N/A)	nent if not contained	in the amendme	nt itself:	
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The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective date if applicable:
(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 date will not be listed as the document's effective date on the Department of State's records.
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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder
action was not required.
Dated 7 18
Signature The both Daly
(By a director, president or other officer of directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
ELIZabeth Daly
(Typed or printed name of person signing)
Director
(Fitle of person cioning)