

(Re	questor's Name)	
(Ad	dress)	
(r.c.		
(Ad	dress)	····
(Cit	y/State/Zip/Phone	:#)
		MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	lv



11/26/18--01015--014 **35.00



C. GOLDEN DEC - 6 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ______ RUBEN'S CUSTOM CONCRETE & RESTORATION CORP

DOCUMENT NUMBER: _____

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GERARDO PEREZ-HERNANDEZ

Name of Contact Person

RUBEN'S CUSTOM CONCRETE & RESTORATION CORP

Firm/ Company

344 BENSON ST

Address

NAPLES FL 34113

City/ State and Zip Code

SPLINCOMETAX@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (239) Area Code & Daytime Telephone Number GERARDO PEREZ-HERNANDEZ Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 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

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

	Articles of Amendment	
· ·	to Articles of Incorporation of	FILED
RUBEN'S CUSTOM CONCRETE & RESTORATI	CUSTOM CONCRETE & RESTORATION CORP	
(Name of Corpora	ntion as currently filed with the Florid	
P1\$000060335		INCLUME SEE STATE
(Dec	ament Nember of Corporation (if known	n)
Pursuant to the provisions of section 607,1006, Fiori its Articles of Incorporation:	ida Statutes, this <i>Floride Profit Corpor</i>	ation adopts the following amendment(s)
A. If amending name, enter the new name of the	corporation:	
N/A		The
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Con word "chartered," "professional association," or th	rp, "Inc," or "Co" A professional	
B. Enter new principal office address, if applicab	N/A	
B. <u>Enter new principal office address, if applican</u> (<i>Principal office address <u>MUST BE A STREET AL</u></i>	<u>de:</u>	
	<u>DDRESS</u>)	
Principal office address <u>MUST BE A STREET AI</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>ODRESS</u>)	the name of the
Principal office address <u>MUST BE A STREET AI</u> C. <u>Fnter new mailing address, if applicable:</u>	Deric DRESS) (OX) N/A N/A tered office address in Florida, enter f	the name of the
 Principal office address <u>MUST BEA STREET AI</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BEA POST OFFICE B</u> D. <u>If amending the registered agent and/or registered agent </u>	Deric DRESS) (OX) N/A N/A tered office address in Florida, enter f	<u>the name of the</u>
 Principal office address <u>MUST BE A STREET AI</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE B</u> D. <u>If amending the registered agent and/or registered agent and/or the new registered</u> 	Deric DRESS) (OX) N/A N/A tered office address in Florida, enter f	the пате of the
 Principal office address <u>MUST BE A STREET AI</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE B</u> D. <u>If amending the registered agent and/or registered agent and/or the new registered agent ag</u>	ODRESS) ODRESS) (OX) N/A (OX)	

.

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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; 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:

<u>X</u> Change	<u>51</u> 7	ohn Doe	
X Remove	<u>V</u> <u>N</u>	<u>Aike Jones</u>	
<u>_X</u> Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	GERARDO HERNANDEZ PEREZ	344 BENSON ST
Add			NAPLES FL 34113
X Remove			
2) Change	\'P	GERARDO PEREZ-HERNANDEZ	344 BENSON ST
X Add			NAPLES FL 34113
Remove			
3) Uhange			Net
Add			
Remove			
4) Change			
AdJ			
Remove			
5) Change			
Add			Catt 3 Mai
Remove			<u></u>
6) Change			
<u>Add</u>			
Remove			

٨	al sheets, if necessary	v). (Be specific)			
L Contraction of the second se					
					· · · · · ·
• • • • • • • • • • • • • • • • • • • •					
					······································
·				- <u>-</u>	<u> </u>
••••••					·····
				· <u></u>	
<u>1 an amendme</u> provisions for	nt provides for an ex-	<u>xchange, reclassifi</u> mondment if not c	cation, or cancellatio ontained in the amen	n of issued shares.	
	licable, indicate N/A))	sneamed in the amen	unient usen.	
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					
(if not app					

.

.

 The date of each amendment(s) added to this document was signed. 	1!/01/2018 option:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this ble document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this data artment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONF)	
The amendment(s) was/were adop by the shareholders was/were suff	need by the shareholders. The number of votes cast for the amendment(ficient for approval.	s)
must be separately provided for e	oved by the shareholders through voting groups. The following statema each voting group entitled to vote separately on the amendment(s):	ent
	or the amendment(s) was/were sufficient for approval	
by	,``,``,``,``	
	ned by the board of directors without shareholder action and sharehold	er
The amendment(s) was/were adop action was not required.	nted by the incorporators without shareholder action and shareholder	
	~ 7	
selected	ector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other course fiduciary by that fiduciary)	

GERARDO PEREZ-HERNANDEZ

(Typed or printed name of person signing)

 \overline{VP}

. .

(Title of person signing)
