## P180000 67599

|                      | (Requestor's Name)       |
|----------------------|--------------------------|
|                      | (Address)                |
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|                      | (City/State/Zip/Phone #) |
| PICK-UF              | WAIT MAIL                |
|                      | (Business Entity Name)   |
|                      | (Document Number)        |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: CASTANON CON   | ICRETE INC   |   |
|-------------------------|--|--|---|
| DOCUMENT NUM            | D1900007500  |  |   |
| The enclosed Articles   | of Amendment and fee are su  | bmitted for filing.  |   |
| Please return all corre | espondence concerning this ma  | tter to the following:   |   |
|                         | CASTANON PEREZ. CELS   | O  |   |
|                         |  | Name of Contact Persor   | 1   |
|                         | <del></del>  | Firm/ Company  |   |
|                         | 810 BORDE DEL CAMINO   | DR   |   |
|                         |  | Address  |   |
|                         | ALTAMONTE SPRINGS, F   |  |   |
|                         |  | City/ State and Zip Code   | 2   |
|                         | CHECO.C986@ICLOUD.C0   | OM   |   |
|                         | E-mail address: (to be us  | sed for future annual report                                     | notification)   |
| For further information | on concerning this matter, pleas   | se call:   |   |
| CASTANON PEREZ          | Z. CELSO   | at (   |   |
| Name                    | of Contact Person  | Area Coo   | de & Daytime Telephone Number   |
| Enclosed is a check for | or the following amount made   | payable to the Florida Depa                                      | artment of State:   |
| S35 Filing Fee          | ☐\$43,75 Filing Fee & Certificate of Status  | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)   |
| Am<br>Div<br>P.C        | iling Address tendment Section vision of Corporations b. Box 6327 lahassee, FL 32314 | Amend<br>Divisio<br>The Co                                       | Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CASTANON CONCRETE INC

| (Name of Corporation as ourse   | ently filed with the Florida Dept. of State)                        |
|---|---|
| P18000067599  | incly fact with the Fibrida Dept. of State)                         |
| (Document Number  | er of Corporation (if known)  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:  | his Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation:   | <u>:</u>  |
| name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.  | . A professional corporation name must contain the word             |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)   |   |
| <ul> <li>C. Enter new mailing address, if applicable:         (Mailing address MAY BE A POST OFFICE BOX)</li> <li>D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office address</li> </ul> |   |
| Name of New Registered Agent  | <del></del>   |
|   | ı street address)   |
| New Registered Office Address:  | (City) (Zip Code)   |
| New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia  |   |
| Signature of Nev  | w Registered Agent, if changing                                     |
| Check if applicable   |   |

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doc 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:<br>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) | <u>Title</u> | Name            | Address                   |
| I) Change                  | S            | LOZANO, VANESSA | 810 BORDE DEL CAMINO DR   |
| X Add                      |              |                 | ALTAMONTE SPRING FL 32714 |
| Remove                     |              |                 |                           |
| 2) Change                  |              | _               |                           |
| Add                        |              |                 |                           |
| Remove 3) Change           | <u></u>      |                 |                           |
| Add                        |              |                 |                           |
| Remove                     |              |                 |                           |
| 4) Change                  |              | _               | <del>_</del>              |
| Add                        |              |                 |                           |
| Remove                     |              |                 |                           |
| 5) Change                  |              |                 |                           |
| Add                        |              |                 |                           |
| Remove                     |              |                 |                           |
| 6) Change                  |              | <del></del>     | <u> </u>                  |
| Add                        |              |                 |                           |
| Remove                     |              |                 |                           |

|      | nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific) |
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| Ifan | mendment provides for an exchange, reclassification, or cancellation of issued shares,                     |
| ргоч | sions for implementing the amendment if not contained in the amendment itself:                             |
|      | f not applicable, indicate N/A)  |
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| The date of each amendment(s) adoption  | 1:  | , if other than the               |
|---|---|-----------------------------------|
| date this document was signed.  |   |                                   |
| Effective date <u>if applicable</u> :   |   |                                   |
|   | (no more than 90 days after amendment file date)  |                                   |
| <b>Note:</b> If the date inserted in this block document's effective date on the Departme | oes not meet the applicable statutory filing requirements, thent of State's records.  | is date will not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |                                   |
| The amendment(s) was/were adopted by<br>action was not required.                          | y the incorporators, or board of directors without shareholder  | action and shareholder            |
| ☐ The amendment(s) was/were adopted by<br>by the shareholders was/were sufficient         | y the shareholders. The number of votes cast for the amendn<br>t for approval.  | nent(s)                           |
|   | by the shareholders through voting groups. The following station of the amendment (s):  |                                   |
| "The number of votes cast for the   | amendment(s) was/were sufficient for approval   |                                   |
| by  |   |                                   |
|   | (voting group)  |                                   |
| DatedSignature  | 79.21/20  |                                   |
| selected, by an   | president or other officer – if directors or officers have not be incorporator – if in the hands of a receiver, trustee, or other iciary by that fiduciary) |                                   |
|   | (Typed or printed name of person signing)   | <del></del>                       |
|   | (Typed or printed name of person signing)   |                                   |
|   | President   |                                   |
|   | (Title of person signing)   |                                   |