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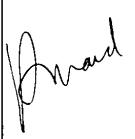




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:ROAD MASTERS	CONSTRUCTION INC	
DOCUMENT NUMF	101000000000000000000000000000000000000		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Nicholas Fanella		
		Name of Contact Person	1
	N.R. FANELLA & CO. INC		
		Firm/ Company	
	434 Tanglewood Drive		
		Address	
	Fort Walton Beach FL 32547	,	
		City/ State and Zip Code	u
nfane	lla@cox.net		
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:at (<u>862-7131</u>
Name of Contact Person) de & Daytime Telephone Number
	r the following amount made		
S35 Fiting 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 Articles of Incorporation nf

ROAD MASTERS CONSTRUCTION INC (Name of Corporation as currently filed with the Florida Dept. of State) P19000003281 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendme its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

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, na 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 Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of eacheld. 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. 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 C 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	LUKE SMITH	78 ROAD 1 SOUTH SW
X Add			CARTERSVILLE GA 30120
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
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6) Change			
Add			
Remove			

If amending or addi (Attach additional she		(Be specific)	<u> </u>			
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If an amendment pr	ovides for an exch	ange, reclassifica	ation, or cancell:	ation of issued sh	iares,	
provisions for impl		idment if not co	ntained in the an	nendment itself:		
(ң посаррасао	le, indicate N/A)					
						
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		-				

The date of each amendment(s) addet this document was signed.	leption:	, if other
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, the partment of State's records,	is date will not be liste
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendm ifficient for approval.	ient(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sharel	nolder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	:r
FEBRUAR Dated	(Y 21, 2019)	
(By a d selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that tiduciary)	
	N.R. FANELLA	
	(Typed or printed name of person signing)	
	RA, INCORPORATOR	
	(Title of person signing)	