P19000015729

(Re	questor's Name)	<u> </u>
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificate	s of Status
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U3/U5/19--U18U4---U03 **35.88

MAR 1 6 2019 S. YOUNG 19 MAR -6 PK 4: 40

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: AMC PAVERS &	CONSTRUCTION INC		
	1BER: P19000015729			
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		
Please return all cori	respondence concerning this ma	itter to the following:		
	ODIJAS CAMINHA			
		Name of Contact Person	<u> </u>	
	OGC ASSOCIATES PA			
		Firm/ Company		
	3275 W HILLSBORO BLVI	• •		
	~~-	Address		
	DEERFIELD BEACH, FL 3.	3442		
		City/ State and Zip Cod	e	
OFF	FICE@OGCASSOCIATES.CO)M		
	-	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
ODIJAS CAMINHA	\	954 at (708-2817	
Name	e of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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

AMC PAVERS & CONSTRUCTION INC

(Name of Corporation as currently filed with the Florida Dept. of State)	
P19000015729	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.4006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation:	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:	
AMC PAVERS & SPECIALTY INC	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A."	the abbreviation
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	T/4 76
	10000000000000000000000000000000000000
C. Enter new mailing address, if applicable:	Sign of Its
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	<u> </u>
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)
	(Sip Colley
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the po	sition.
Signature of New Registered Agent, if changing	- <u>-</u>

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 De	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		-		
Add				
Remove				
2) Change		 -		
Remove				
3) Change		_		
Add				
Remove				
Change		_		
Add				
Remove				
Change				
Add				
Remove				
Change				
Add				
Remove				

n amendment provides for an exchange, reclassification, or cancellation of issued shares, axisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	жи аданнопан ѕпее	g additional Artic ets, if necessary).	(Be specific)				
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	ption:	, 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 blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ich voting group entitled to vote separately on the amendment(s):	t.
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
03.01.2019		
DatedSignature	Thruftte Buffer	
(By a dire 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 court if fiduciary by that fiduciary)	
Α	NTONIO MONTEIRO	
_	(Typed or printed name of person signing)	
Pl	RESIDENT	
	(Title of person signing)	