P190000 71886

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300335546323

18/15/19--01031--020 **85.00

19 OCT 15 PM 2: 41

Come Change

107 0 7 000 D CUCHING

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: FWB CONCRE INC. DOCUMENT NUMBER: P 9000071886.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Williams Bautsta Zunigic Name of Contact Person
3558 Klwanee ld#B Address Lake WNH, 14 33462 City/ State and Zip Code
Lake WWth, 12 33462
. City/ State and Zip Code
maggiebsate Ognail. con
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: $ \begin{array}{cccccccccccccccccccccccccccccccccc$
Williams Baufish at BUL, 225-9609
Name of Contact Person Area Code & Daytime Telephone Number 75
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FI, 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

	currently filed with the Flo		****
(Document No	umber of Corporation (if kno	own)	
Pursuant to the provisions of section 607,1006, Florida Statuts Articles of Incorporation:	tes, this Florida Profit Corp.	oration adopts the follow	ing amendment(s)
	ete, Inc	W	The _new
name must be distinguishable and contain the word "con". "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrew	z," or "Co". A professione		
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
If amending the registered agent and/or registered off new registered agent and/or the new registered office		r the name of the	717 2: 6
Name of New Registered Agent			
	orida street address)		_
New Registered Office Address:	(Cuy)	Florida(Za	n Code)
	,		
iew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent:	dell'anni anno de el anno siei an	

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 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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc		
X Remove	$\underline{\mathbf{V}}$	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				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_	· · ·	
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	or adding additional Articles onal sheets, if necessary). (i			
Pleas	e correct	name of	Company	
		••		
 				
				-
provisions f	nent provides for an exchangor implementing the amenda opticable, indicate N/A)	ge, reclassification, or can nent if not contained in th	cellation of issued shares, e amendment itself:	
				

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable:	, if other than the
(no more than 90 days after amendment file do	(te)
Note: If the date inserted in this block does not meet the applicable statutory filing requiremedocument's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the a by the shareholders was/were sufficient for approval.	mendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	l shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.	reholder
Dated	
Signature Williams Brazilia (By a director, president or other officer – if directors of officers have selected, by an incorporator – if in the hands of a receiver, trustee, of appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	tr Zuniga
Prosident	
(Title of person signing)	