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Amend/Mame

MAY 1 1 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: (The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Cach OS Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation

Cotraches Concrete to	νC
(Name of Corporation as currently filed with the Florid	a Dept. of State)
P190007448	6
(Document Number of Corporation (if known	n)
• ,	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corpora</i> its Articles of Incorporation:	ation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Brave Concrete Inc.	The new
name must be distinguishable and contain the word "corporation," "company," or "incorpo	rated" or the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corpora "chartered," "professional association," or the abbreviation "P.A."	ttion name must contain the word
	· ·
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	7.4
	72
	<u>-i</u>
C. Enter new mailing address, if applicable:	PH D
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>
	2
	
 	
D. If amending the registered agent and/or registered office address in Florida, enter t	he name of the
new registered agent and/or the new registered office address:	
Name of New Revistered Agent YOLNARYS B. RODRIG	icz M.
512 MOONRAKER	et.
(Florida street address)	
New Registered Office Address:	, Florida
(Cip)	(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.

Signature of New Reversiered 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)

Example:

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.

X Change	PT Job	n Doe		
X Remove	<u>V</u> <u>Mi</u>	ke Jones		
X Add	<u>SV</u> <u>Sal</u>	ly Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
l) Change	P	Jorge Albert H	kronombez 512 Noonrahe Apopha, FL 32	r H
Add		Ū	Apopha, FL 32	712
_X Remove	Ω	V \ 0		
2) Change	<u></u>	Yoendrys B	Rodriguez 512 Moonrake	cct
X Add			Apopka, fl 30	2712
Remove 3) Change				
Add			 	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove			<u> </u>	
6) Change				
Add			 	·
Remove				

With II	or adding additional Articles, enter change(s) here: fonal sheets, if necessary). (Be specific)	
		-
	•	
<u>an ar</u> Fork	ment provides for an exchange, reclassification, or cancellation of issued shares.	
(ij	for implementing the amendment if not contained in the amendment itself: pplicable, indicate N/A)	

The date of each amendment(s) adoption: date this document was signed.	04/3	20/2020	, if other than the
•	04/	20/2020	
Effective date if applicable:		00 days after amendmen	t file date)
Note: If the date inserted in this block does n document's effective date on the Department of		cable statutory filing re	quirements, this date will not be fisted as the
Adoption of Amendment(s) (CE	IECK ONE)		
The amendment(s) was/were adopted by the action was not required.	incorporators, or	board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		ne number of votes cast	for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes cast for the ame	ndment(s) was/w	ere sufficient for approv	al
by	ing group)		·
(vol	ing group)		
Dated 04/20/	2020		
(By a director, pres	id e nt or other off: orporator — if in th	cer – if directors or office hands of a receiver, to	
			ROSPIEVEZ MARINO
f	Reside)
,	Title of person si	gning)	