## P19000090061

(Re	questor's Name)	
(Ad	dress)	
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(Bu	siness Entity Nam	e)
(Do	cument Number)	
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2020 OCT 26 AM II: 35 SECRETARY OF STATE

2020 OCT 26 AM II: 35

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIONS	PALESTRA CON	CRETE INC	·
DOCUMENT NUMBER: P19	200000000		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amend	<i>lment</i> and fee are su	bmitted for filing.	
Please return all correspondence	concerning this mat	tter to the following:	
JOSE D	DORNELAS		
		Name of Contact Person	
		Firm/ Company	
6 WEST	BURY LN		
		Address	
PALM C	OAST, FL 32164	0': 10: 17' 0 1	
		City/ State and Zip Code	<b>?</b>
<del>-</del>	EPING@YAHOO.G		
E-m	ail address: (to be us	ed for future annual report	notification)
For further information concern	ing this matter, pleas	e call:	
JOSE D DORNELAS		at (	772-8944
Name of Contac	Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the follo	wing amount made p	payable to the Florida Depa	rtment of State:
	3.75 Filing Fee & ertificate 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 Add Amendment S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

PALESTRA CONCRETE INC

2020 OCT 26 AH II: 35

(Name of Corporation as cu	irrently filed with the Florida DepConstate Y OF STATE TALL ATTACHES, FL.
	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	on:
N/A	The new
	poration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the ation "P.A."
	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>
,	
C. T. A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<del></del>
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office a	ddress;
Name of New Registered Agent N/A	
<u></u>	
(Flo	rida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent
I hereby accept the appointment as registered agent. I am fan	
	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 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 Do	<u>c</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	P		PAULO E DOS SANTOS	6 WESTBURY LN
Add				PALM COAST.FL 32164
X Remove				
2) Change		_		
Add				
Remove				
3 ) Change	<del></del>	<del>_</del>	-	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	<del></del>			
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A
<del>- · · · · · · · · · · · · · · · · · · ·</del>

The date of each amendment(s) adde this document was signed.	ndoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the fi	block does not meet the applicable statutory filing requirements, this dat epartment of State's records.	e will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	)
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	n
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	.,,	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
10-22-20 Dated		
Signature		
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	JOSE D DORNELAS	
	(Typed or printed name of person signing)	
	VICE-PRESIDENT	
	(Title of person signing)	