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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ALL ABOUT PAV	ERS & BLOCKS CORP		
DOCUMENT NUMB	ER: P20000075261			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
ŀ	HELEN RODRIGUEZ			
-		Name of Contact Persor	1	
٦	TAXSMART ACCOUNTING			
<u>-</u>		Firm/ Company		
4	6653 POWERS AVE STE 13	• •		
_	5055 FOWERS AVE STE 15			
		Address		
J _	IACKSONVILLE. FL 32217			
		City/ State and Zip Code	2	
•	FAXSMARTCORP@GMAL	L.COM		
-	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
HELEN RODRIGUEZ		904	733-0027	
Name of Contact Person		at (733-0027 de & Daytime Telephone Number	
Name o	I Contact Person	Area Co	de & Daytille Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ALL ABOUT PAVERS & BLOCKS CORP

(Name of Corporation	as currently filed with the Florida D	Dept. of State)
P20000075261		
(Docume	nt Number of Corporation (if known)	•
Pursuant to the provisions of section 607.1006. Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation	n adopts the following amendment(s):
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "cor, "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A professional corporation	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	
	 	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	·	21-27 057
	<u></u>	
		
D. If amending the registered agent and/or registere		name of the
new registered agent and/or the new registered of	Mice address:	
Name of New Registered Agent		
		7
	(Florida street address)	
New Registered Office Address:		. Florida
The state of the s	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the oblive.	tions of the position
Thereby accept the appointment as registered agent.	and the experiment and the experiment and experimen	and passing
Signat	ure of New Registered Agent, if changing	ng
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 60	07.0120 (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	<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) X Change	P	ORBIN A MARADIAGA GARCIA	5025 WELBORN RD
Add			JACKSONVILLE, FL 32207
Remove			
2) Change	<u>VP</u>	NUVIA C MARADIAGA RODAS	5025 WELBORN RD
X Add			JACKSONVILLE, FL 32225
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			.
Remove		•	

Auach <i>aaamonai sheets, y</i>	f necessary). (Be spec	ific)			
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f an amendment provide provisions for implemen	s for an exchange, rec	lassification, or c	ancellation of iss	ued shares,	
(if not applicable, ind	licate N/A)	not contained in	the amendment	113011.	
					
					
_ .					

	(s) adoption:	, if other than the
ate this document was signed [[fective date if applicable:	10/22/2020	
<u> </u>	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, ne Department of State's records.	this date will not be listed as the
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without sharehold	der action and shareholder
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amen are sufficient for approval.	dment(s)
must be separately provide	e approved by the shareholders through voting groups. The following d for each voting group entitled to vote separately on the amendments cast for the amendment(s) was/were sufficient for approval	
	" " " " " " " " " " " " " " " " " " "	
by	(voting group)	
10/22. Dated	2020	
Signature ()	vvin-moradioga	
(B	y a director, president or other officer – if directors or officers have no lected, by an incorporator – if in the hands of a receiver, trustee, or other oppointed fiduciary by that fiduciary)	
	ORBIN A MARADIAGA GARCIA	
	(Typed or printed name of person signing)	,
	PRESIDENT	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·