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COVER LETTER

TO: Amendment Section Division of Corporations	•		
SUBJECT: MTZA COCRETE SERVICE	ES INC Name of Corporation		
DOCUMENT NUMBER: P2100003737	•		
The enclosed Articles of Correction and		or filing	
		•	
Please return all correspondence conce	ming this matter to the	ne following:	
AARON MARTINEZ		_	
Name of Contact Person	•		
MTZA CONCRETE SERVICES INC			
Firm Company		-	
4673 BRADBURY ST			
Address		-	
PORT ST. LUCIE FL 34953			
City/State and Zip Cod	e	-	
Amartinez06969@gmail.com			
E-mail address; (to be used for future ann	ual report notification)	•	
For further information concerning this	matter, please call:		
AARON MARTINEZ	754	367-1772	
Name of Contact Person	at (Aren Code	Daytime Telephone Number	
Enclosed is a check for the following a	mount:		
■ \$35.00 Filing Fee	□ \$43.75 Filir	☐ \$43.75 Filing Fee & Certificate of Status	
☐ \$43.75 Filing Fee & Certified Copy		☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy	
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 CORRECTION

Fог

FILED

١	AT	ZA	CON	CRETE	SERV	/ICES I	NC.

2021 NOV 29 PM 1: 09

Name of Corporation as currently filed with the	ne Florida Dept. of State,
P21000037377	TATE THASSES FOR THE
Document Number (if kno	
Pursuant to the provisions of Section 607.0124, Florida S	tatutes.
These articles of correction correct PROFIT CORPORATIO	N
filed with the Department of State on 04/19/2021	f Document)
Specify the inaccuracy, incorrect statement, or defect:	
correct officers - Article VI	
	_
	<u></u>
Correct the inaccuracy, incorrect statement, or defect:	
WANT ADD AS VICE PRESIDENT OF THIS CORPORATION	<u> </u>
MARTIN MARTINEZ	
ADDRESS 4384 NW 9TH AVE APT 290 POMPANO BEACH F	L 33064
Jana K	la tem
(Signature of a director, president or other officer not been selected, by an incorporator - if in the ha other court appointed tiduciary, by that fiduciary.	ands of the receiver, trustee, or
AARON MARTINEZ	PRESIDENT
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00

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