P21000039205

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COVER LETTER

TO: Amendment Section ----

Division of Cor	porations		
NAME OF CORPO	DRATION: FM PAVERS INC		
	1BER: P21000039205		
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	WILKIN F MEJIA ACOSTA	Λ.	
		Name of Contact Person	n
	FM PAVERS INC		
		Firm/ Company	
	4345 NW 3RD TER		
		Address	
	POMPANO BEACH, FL 330	064	
		City/ State and Zip Cod	e
	WILACOSTA1992@GMAII	L.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
WILKIN F MEJIA 2	ACOSTA	at (248-0364
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	illing Address		Address
	nendment Section		ment Section
	vision of Corporations		on of Corporations
	D. Box 6327 Hahassee, FL 32314		entre of Tallahassee N. Monroe Street, Suite 810
111	Hallassee, I L 22214	<u> </u>	v. Montoe Street, Stille 610

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FM PAVERS INC	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P21000039205	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "("Inc.," or Co.," or the designation "Corp," "Inc," or "Co". 2" "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. 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)	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered office adding registered agent and/or the new registered office address	
-	
(Classification)	vet address)
triorida sir	
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar w	· · · · · · · · · · · · · · · · · · ·
Signature of New R	egistered 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)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	LUIS A. ORELLANO GALVEZ	4345 NW 3RD TER
X Add			POMPANO BEACH, FL 33064
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•					
• • • •			•		
If amending or addi	ing additional Articles, eets, if necessary).— (B	, enter change(s) he	<u>re</u> :		
(Attach additional she	vets, if necessary). (B	e specific)			
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· <u>-</u>					
		-			
-	· · · · · · · · · · · · · · · · · · ·	 			
					
If an amendment pr	ovides for an exchange	e, reclassification, o	r cancellation of is	sued shares,	
provisions for impl (it not applicable	ementing the amendm le, indicate N/A)	ent if not contained	l in the amendmen	t itself:	
(<i>i</i> , ,,,,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,	c, macare inity				
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			· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s)	05/11/2021 adoption:		, if other than the
date this document was signed. 05.	/11/2021		
Effective date if applicable:			
	(no more than 90	days after amendment file date)	
Note: If the date inserted in this document's effective date on the I		able statutory filing requirements, this	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were action was not required.	dopted by the incorporators, or b	ooard of directors without shareholder ac	rtion and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were		number of votes cast for the amendmen	nt(s)
		ough voting groups. The following states vote separately on the amendment(s);	ment
	st for the amendment(s) was/wer	• •	
by	(voting group)	<u>.</u>	
	(voting group)		
05/11/202 Dated	1		
Signature $\underline{\mathcal{W}}$	ilkin Ferhando		
select		er – if directors or officers have not been hands of a receiver, trustee, or other co	
	WILKIN F MEJIA ACOSTA		
	(Typed or printed n	name of person signing)	
	PRESIDENT		
	(Title of person sig	ning)	