# P93000079948

(Re	equestor's Name)	<u></u>
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	ne #)
_	WAIT	
(Bu	siness Entity Na	me)
(Do	cument Number	)
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FEB 11 2014 C. CANKNOTHERS 14 FEB -5 PM 4: 32 SECRETARY OF STATE TALLAHASSEE, FLORIDA

### **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: HICKS ASI	PHALT REPAIR	INC.		
DOCUMENT NUME	D0300007004	8			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	PENNY HICKS				
	HICKS ASPHAL	Name of Contact Person	n		
	5191 CEDAR PC	Firm/ Company			
	JACKSONVILLE	Address Fl 3226			
	OAOROOHVILLE	City/ State and Zip Cod	e	<del></del>	
joe	@joeinjax.com	sed for future annual report	notification)	- 50 ±	
For further information	n concerning this matter, pleas	·	,	FEB -5	T
PENNY HICKS		<sub>at (</sub> 904	, 751-7030	1/455 F. PH 4: 32	ار مساح ار مساح معدد:
Name o	of Contact Person	Area Co	ode & Daytime Telephone N	umber	,
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	32	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate 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 Address Amendment Section Division of Corporations P.O. Box 6327		Ameno Divisio	Address dment Section on of Corporations Building	gt	

2661 Executive Center Circle Tallahassee, FL 32301

### **Articles of Amendment Articles of Incorporation** of

# HICKS ASPHALT REPAIR INC.

## P93000079948

	<b>Articles of Amendment</b>		
	to Articles of Incorporation		5 5 N
	of	.r	100 TO 1
HICKS ASPHALT REPAIR I	NC.		THE COLUMN
(Name of Corporation as curre	ently filed with the Florida Dept.	of State)	
93000079948			
(Document Num	nber of Corporation (if known)		THE SPANSON
ursuant to the provisions of section 607.1006, s Articles of Incorporation:	Florida Statutes, this Florida Prof	fit Corporation adopts	12 July 1
. If amending name, enter the new name of	the corporation:		
			The new
Enter new principal office address, if app. Principal office address MUST BE A STREE  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE  Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or registered agent and/or the new registere	: CE BOX) registered office address in Floric	da, enter the name o	f the
Name of New Registered Agent			
	(Florida street address)		
		, Florida	<u></u>
New Registered Office Address:	(City)		(Lip Coae)
	(Florida street address) (City)	, Florida	(Zip Code)

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	GARY W HICKS	5191 CEDAR POINT RD
Add			JACKSONVILLE, FL 32216
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			<del></del>
4) Change		_	TALLAHA
Add			
Remove			en e
5) Change			ion ₹
Add			DA -
Remove			
6) Change			<u> </u>
Add			
Remove			

Attac	h <i>additional si</i>	ling additional A heets, if necessary,	). (Be specifi	c)		
		,				
		<u> </u>				
			<u></u>			
				<del></del>		
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	<del>_</del>					
an	amendment p	rovides for an ex	change, reclas	sification, or c	ancellation of issu the amendment it	ed shares,
prov	isions for imp	olementing the an ble, indicate N/A)	nendment if n	ot contained in	the amendment it	self:
,	(ij noi appiica	ore, marcure 1971)				
	<del></del> -					
						<del></del>
	-			···		
					•	
					<del></del>	

The date of each amendment(s) ad date this document was signed.	option: OCTOBER 17, 2013	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	<b>-</b>
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated JANUAF	RY 30, 2014	
Dated	ng a. Hicks	
Signature #	my a. Hufs	
(By a di	rector, president or other officer – if directors or officers have not been	
	I. by an incorporator — if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
• •		
_	PENNY A HICKS	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	<del></del>

14 FEB -5 PH 4: 32
SECRETARY OF STATE
ANASSEE FLORINA