P97000064734

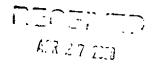
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

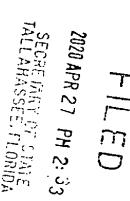
Office Use Only



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MAY 0 7 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SUNSHINE PAVI	NG INC	
	IBER: P97000064734		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	DOMINIK MONTES		
	SUNSHINE PAVING INC	Name of Contact Person	1
		Firm/ Company	
	17755 35 PLACE NORTH		
	LOVABATCHEUD: 2217/	Address	
	LOXAHATCHEE FL 33470	City/ State and Zip Cod	<u> </u>
		City/ State and Zip Cod	C
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
DOMINIK MONTE	s	at (⁹⁵⁴ Area Co	650-5301
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	_	☐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, FI. 32314		Amend Divisio The C 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FI, 32303

Articles of Amendment to Articles of Incorporation of

SUNSHINE PAVING INC

(Name of Corp	oration as currently filed with the Flori	da Dept. of State)
P97000064734		
(1)	Occument Number of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this <i>Florida Profit Corpor</i>	ration adopts the following amendmen
A. If amending name, enter the new name of	the corporation:	
SUNSHINE MILLING INC		The new
name must be distinguishable and contain the worlder," or Co., " or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A professional corpor	
B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC) D. If amending the registered agent and/or renew registered agent and/or the new regist	gistered office address in Florida, enter	SEGRETAGE TAGE THE name of the page of the
	ered office address.	27 27
Name of New Registered Agent		
	(Florida street address)	- 100 1 2: 33 D
New Registered Office Address:	(City)	, Florida <i>(Zip Code)</i>
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		
	signature of New Registerea Agent, if the	unging
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 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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. The 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, Was Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			 -
Add			
Remove 3.) Change			
Add			_
Remove			<u>-</u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach	iding or adding additional sheet	s, if necessary).	(Be specific)			
							
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-							
<i>C</i>		.:	h	.:47 41		to an and a barrers.	
provis	mendment prov Jions for implen	nenting the am	<u>nange, reciass</u> endment if no	t contained in	the amendme	nt itself:	
ŧij	not applicable,	indicate N/A)					
				,			
					·		
					·- · ·		
					····	-	
		_	_				

The date of each amendment(s) adoption:
date this document was signed. 04.20.20
President data is applicable.
tno more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by" (voting group)
(voting group)
Dated Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
DOMINIK MONTES
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)