# P07000072834

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## **LAZARUS**

### CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

and the second of the second o		Office Use Only
ORPORATION NAME(S) & DOCUM	ENT NUMBER(S),	(if known):
JARAMILLO S	TONE C	ORPORATION
(Corporation Name)	(Document #)	
·		
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
	, ,	
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NEW FILINGS	<b>AMENDMENTS</b>	
☐ Profit	Amendment	
Not for Profit		f R.A., Officer/Director
Limited Liability  Domestication	Change of Rep Dissolution/W	
Other	Merger	Tulurawai
·	-	
OTHER FILINGS	REGISTRATION	N/QUALIFICATION
Annual Report	Foreign	
Fictitious Name	Limited Partners Reinstatement	
	Trademark	•
• .	Other	
P2F031(7/97)		Examiner's Initials

#### Articles of Amendment to Articles of Incorporation of

# JARAMILLO STONE CORPORATION (Name of Corporation as currently filed with the Florida Dept. of State) P07000072834 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

A. If amending name, enter the new name of the corporation:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Offices Insullo
Signature of New Registered Agent, if changing

(City)

(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)

<u>Title</u>	Name	Address	Type of Action
<u>s</u>	ELIZABETH JARAMILLO	903 Stillwater Court Weston, FI 33327	_
			_
			_ Add _ Remove
(attach addit	tional sheets, if necessary). (Be speci	fic)	
	ndment provides for an exchange, rec for implementing the amendment if		
	applicable, indicate N/A)	not contained in the amendment	itseii:

Th	The date of each amendment(s) adoption: 10/10/2008				
Efi	fective date if applicable:				
	(no more than 90 days after amendment file date)				
Ad	loption of Amendment(s) (CHECK ONE)				
	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 cast for the amendment(s) was/were sufficient for approval				
	by"  (voting group)				
	(voting group)				
⊿	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.				
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.				
	Dated_10/04/2008				
	Signature  (By a director, president or other officer) if directors or officers have not been selected, by an incorporator – if in the hards of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
	Elizabeth Jaramillo (Typed or printed name of person signing)				
	Secretary / Director  (Title of person signing)				