P09000000248

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2021 DEC -6 PM 3: 16
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SERENE PAVERS	S & STONESCAPES, II	NC.
	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Kenneth Bohannon, Esq.		
		Name of Contact Per	rson
	Coronado Law Group, PLLC		
		Firm/ Company	
	221 N. Causeway, Ste. A		
		Address	
	New Smyrna Beach, FL 3216	i9	
		City/ State and Zip C	ode
	kbohannon@CFLLawyer.cor	າງ	
	E-mail address: (to be us		ort notification)
For further information	n concerning this matter, pleas		600 2220
	of Contact Person	at () 690-2230 Code & Daytime Telephone Number
	r the following amount made		
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	© S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address Industrial Industria	Am Div The 241	eet Address endment Section ision of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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SERENE PAVERS & STONESCAPES, INC.

(Name of Corporation as currently filed with the Florida Dept. of SERVICE TARY OF STA P09000000248 (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: A. If amending name, enter the new name of the corporation: 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 -(Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

 \square 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)

Example:

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.

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	<u>s</u>	Denise Gawel-And	ersen	1605 W. Canal Street
X Add				New Smyrna Beach, F1, 32168
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
Remove				

attach additional sheets, if necessary).	(Be specific)				
					
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f an amendment provides for an exc	hange, reclassifi	cation, or cancell:	ation of issued	shares,	
	endment if not c	ontained in the ar	<u>nendment itse</u>	<u>lf:</u>	
provisions for implementing the am (if not applicable, indicate N/A)					
provisions for implementing the am					
provisions for implementing the am					
provisions for implementing the am					
provisions for implementing the am					
provisions for implementing the am					
provisions for implementing the am					
provisions for implementing the am					

The date of each amendment(s) adoption	li	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this block document's effective date on the Departme	nes not meet the applicable statutory filing requirent of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without s	shareholder action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for t for approval.	he amendment(s)
	by the shareholders through voting groups. The fe thing group entitled to vote separately on the ame	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated Docusigned by: Signature Enc Barto	lonni	
(By a director, selected, by an	president or other officer – if directors or officers incorporator – if in the hands of a receiver, trustectary by that fiduciary)	
Eric Ba	artolozzi	
	(Typed or printed name of person signing)	
Preside	nt	
	(Title of person signing)	