## P18000081728

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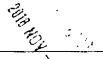
All to the second secon TO: Amendment Section Division of Corporations NAME OF CORPORATION:  $\underline{\underline{\hspace{1cm}}}^{N}$  DESIGN PAVERS, CORP. DOCUMENT NUMBER: P18000087728 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DANIEL DIAS QUIRINO Name of Contact Person N DESIGN PAVERS, CORP. Firm/ Company 4445 KINGS BARN CT UNIT 204 Address FORT MYERS, FL 33916 City/ State and Zip Code natvillafane@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239 ) 834-1116
Area Code & Daytime Telephone Number DANIEL DIAS QUIRINO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to

## Articles of Incorporation of

N DESIGN PAVERS, CORP.



(Name of Corporation as currently	filed with the Florida Dept. of State)	-
P18000087728		Tig-
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following at	mendment
A. If amending name, enter the new name of the corporation:		
NDESIGN PAVERS, CORP.	Th	ie new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	" "company," or "incorporated" or the abbre'o". A professional corporation name must con	eviation
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 addressive registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address:	Florida	(·)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.	
Signature of New Re	gistered Agent, if changing	

. . . .

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		<del></del>		
Add				
Remove				
2) Change				
Add		<del></del> -		
Remove				
3 ) Change	-			
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Remove				· · · · · · · · · · · · · · · · · · ·
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  A	(Attach addition	or adding additional Articles, e anal sheets, if necessary). (Be	specific)	•		
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(if not applicable, indicate N/A)	provisions fo	r implementing the amendmen	rectassification, or at if not contained i	n the amendment itse	i spares, lf:	
A	(if not ap	plicable, indicate N/A)			<del></del>	
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The date of each amendment(s) ac	loption:	if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient 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	
10/19/2018 Dated		
Signature D	ANIEL DIAS QUIRINO	
(By a d selected	irector, 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)	
	DANIEL DIAS QUIRINO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	