Current Principal Place of Business: 3495 5TH AVE N ST PETERSBURG, FL 33713			
Current Mailing Address:			
3495 5TH AVE N ST PETERSBURG, FL 33713 US			
FEI Number: 47-4128395		Certificate of Status Des	ired: No
Name and Address of Current Registered Agent:			
INGALLS ASSOCIATES, PA, CPAS 3495 5TH AVE N ST PETERSBURG, FL 33713 US			
3495 5TH AVE N	red office or regist	ered agent, or both, in the State of Flo	prida.
3495 5TH AVE N ST PETERSBURG, FL 33713 US	red office or regist	ered agent, or both, in the State of Flo	orida. 11/07/2016
3495 5TH AVE N ST PETERSBURG, FL 33713 US The above named entity submits this statement for the purpose of changing its register	red office or regist	ered agent, or both, in the State of Flo	
3495 5TH AVE N ST PETERSBURG, FL 33713 US The above named entity submits this statement for the purpose of changing its register SIGNATURE: FRANCK BEAUGENDRE	red office or regisi	ered agent, or both, in the State of Flo	11/07/2016
3495 5TH AVE N ST PETERSBURG, FL 33713 US The above named entity submits this statement for the purpose of changing its registern SIGNATURE: FRANCK BEAUGENDRE Electronic Signature of Registered Agent Authorized Person(s) Detail :	red office or regist	ered agent, or both, in the State of Flo	11/07/2016
3495 5TH AVE N ST PETERSBURG, FL 33713 US The above named entity submits this statement for the purpose of changing its register SIGNATURE: FRANCK BEAUGENDRE Electronic Signature of Registered Agent Authorized Person(s) Detail : Title MGR			11/07/2016
3495 5TH AVE N ST PETERSBURG, FL 33713 US The above named entity submits this statement for the purpose of changing its registern SIGNATURE: FRANCK BEAUGENDRE Electronic Signature of Registered Agent Authorized Person(s) Detail : Title MGR Name BLUE CEDAR MANAGEMENT LLC	Title	MGR	11/07/2016

Entity Name: HOME AND STONE FLORIDA, LLC

Current Principal Place of Business

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANCK BEAUGENDRE

MGR

11/07/2016 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Nov 07, 2016 Secretary of State CR0161613926