Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN CENTERSTONE GROUP, INC.

Certificate of Status	0
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A. RAMSEY MAY 29, 2024

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Electronic Filing Menu

Corporate Filing Menu

Help

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

2024 HAY 28 PM 1: 24

F	F22000000859		
_	(Document number of corp	oration (if known)	
Centerstone Group, Inc.			
(Name	of corporation as it appears on the r	ecords of the Department of State)	
	3	02/11/22	
(Incorporated u	nder laws of)	(Date authorized to do business i	in Florida)
	SECTION	11	
	(4-7 COMPLETE ONLY THE AI	PPLICABLE CHANGES)	
~	of the corporation, when was the ch	ange effected under the faws of its jurisd	iction of
(Name of corporation after the amer not contained in new name of the co	ndment, adding suffix "corporation," orporation)	"company," or "incorporated," or appro	priate abbreviation
(If new name is unavailable in Floric	da, enter alternate corporate name ad	opted for the purpose of transacting busi	ness in Florida)
If the amendment changes the r	period of duration, indicate new perio	od of duration.	
	•		
	(New durati	on)	
	(i.e. autai	<i>M</i> 1,	
. If the amendment changes the j	iurisdiction of incorporation, indicate	: new jurisdiction.	
	(New jurisdic	aion)	
If amending the registered agent a new registered agent and/or the m	and/or registered office address in	Florida, enter the name of the	
Name of New Registered Agent	Northwest Registered Agent I I C		
	7901 4th St N STE 300		
	(Florida street ade	dress)	
New Registered Office Address:	St. Petersburg		
	(City)	(Zip Ce	nde)

Signature of New Registered Agent, if changing

5/27/2024 13.02:21 PDT To: 18506176380 Page: 3/3 Fax: 8134365206

9	.	ſſ,	the ameno	lment	changes	person,	title or	capacit	y in	accordance	with	607.	1504	(4).	indicate	that	change:

Title/ Capacity	Name	<u>Address</u>	Type of Action
President	Mark Weaver	680 PILOT RD STE D	
			
		LAS VEGAS NV 89119-9020	
_			T Remove
Secretary	Mika Weaver	7901 4th St N STE 300	
		St. Deterabling El. 22702	
		St. Petersburg FL 33702	Remove
		<u> </u>	unive
Treasure r	Mark Weaver	680 PILOT RD STE D	
·			🔲 Add
		LAS VEGAS NV 89119-9020	_
Director	Mark Weaver	680 PILOT RD STE D	
		LAS VEGAS NV 89119-9020	
			Remove
DPST	Mark Weaver	680 PILOT RD STE D	■Add
		LAS VEGAS NV 89119-9020	
10. Attached is a of the application of the application of the law	recrificate or document of similar in ation to the Department of State, by the vs of which it is incorporated.	nport, evidencing the amendment, authenticated Secretary of State of other official having custo	I not more than 90 days prior to delivery dy of corporate records in the jurisdiction
	Nut gmi	t no	
	(Signature of a receiver or	a director, president or other officer - if in the lother court appointed fiduciary, by that fiducian	ands of ry)
Nat Smit		Filing Incorp	oorator
	(Typed or printed name of person si	gning) (Title of	person signing)

FILING FEE \$35.00