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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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COVER LETTER

	Registration Sec Division of Corp						
SUBJEC	_{:T:} J	CHENRIQUE GRANITE I	LLC				
3013000		Name of Limite	ed Liability Company				
The enclo	osed Articles of A	Amendment and fee(s) are subt	nitted for tiling.				
Please ret	turn all correspo	ndence concerning this matter t	o the following:				
		ANDRE R. HENRI					
			Name of Person				
		JCHEN	RIQUE GRANITE LLC				
			Firm/Company			2013 OCT -3	
		11602 COLO	NY LAKE DR			9C T	action.
			Address			ယ်	1
		TAMPA	A, FL 33635		inig. To	- D	
			City/State and Zip Code			37)	أميد الأ
			Z@LIVE.COM	on)		دىن. ھۆھ	
For furth	er information c	oncerning this matter, please ca	·				
	ANDRE R. H	IENRIQUE	at (<u>813)</u> 484-9454			_	
	Name o	f Person	. Area Code & Daytime Te	dephone Number	er		
Enclosed	d is a check for the	he following amount:					
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60,00 Fi Certific Certific (additic	ate of Sed Copy	tatus &	losed)
	Regisu Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURIER Registration Section Division of Corporatio Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT . TO ARTICLES OF ORGANIZATION OF

JCHENRIQUE GRANITE LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/31/2007 and assigned Florida document number $\underline{L0}7000057221$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: STONE BOYZ LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

Zip Code

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address Type of Action
ASS.SEC.	ADILSON V GONCALVES	11602 COLONY LAKE DR
		TAMPA FL 33635 Remove
		Add
		Remove
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		Remove
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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d	·
	Signature of a member or anthorized representative of a member ANDRE R. HENRIQUE

Typed or printed name of signee

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Filing Fee: \$25.00

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