## L10000068704

| (Red                                    | questor's Name)   | <del> </del> |  |  |  |
|---|-------------------|--------------|--|--|--|
| (Address)                               |                   |              |  |  |  |
| (Address)                               |                   |              |  |  |  |
| (Cit                                    | y/State/Zip/Phone | e #)         |  |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL         |  |  |  |
| (Business Entity Name)                  |                   |              |  |  |  |
| (Document Number)                       |                   |              |  |  |  |
| Certified Copies Certificates of Status |                   |              |  |  |  |
| Special Instructions to Filing Officer: |                   |              |  |  |  |
|   |                   |              |  |  |  |
|   |                   |              |  |  |  |
|   |                   |              |  |  |  |

Office Use Only



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08/23/10--01018--019 \*\*25.00



J. BRYAN

AUG 24 2010

**EXAMINER** 

## **COVER LETTER**

| TO: Registration Se<br>Division of Cor         |   |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| SUBJECT: STONE SOURCE TILE & INSTALLATIONS LLC |   |  |  |  |  |  |  |
| Name of Limited Liability Company              |   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| The enclosed Articles of                       | Amendment and fee(s) are sul                  | omitted for filing.                          |  |  |  |  |  |
| Please return all correspo                     | ndence concerning this matter                 | to the following:                            |  |  |  |  |  |
|  |   | Jawad Rais                                   |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
|  | Name of Person                                |  |  |  |  |  |  |
|  | STONE SOUP                                    | SLLC ZO                                      |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
|  | 3660  | FILE 23 PM                                   |  |  |  |  |  |
|  | Fig. 2  |  |  |  |  |  |  |
| ب کی ہے۔<br>Jensen Beach FL 34957              |   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
|  | City/State and Zip Code  jawad.rais@gmail.com |  |  |  |  |  |  |
|  | E-mail address: (                             | to be used for future annual report notifica | ntion)                                 |  |  |  |  |
| For further information co                     | oncerning this matter, please of              | call:  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
|  | awad Rais                                     | at (   | 22-5292                                |  |  |  |  |
| Name of  | f Person                                      | Area Code & Daytime                          | lelephone Number                       |  |  |  |  |
| Enclosed is a check for th                     | ne following amount:                          |  |  |  |  |  |  |
| \$25.00 Filing Fee                             | \$30.00 Filing Fee &                          | \$55.00 Filing Fee &                         | \$60.00 Filing Fee,                    |  |  |  |  |
| _  | Certificate of Status                         | Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy |  |  |  |  |
|  |   | , , ,  | (additional copy is enclosed)          |  |  |  |  |
|  |   |  |  |  |  |  |  |
|  | ING ADDRESS:                                  | STREET/COURIE                                | R ADDRESS:                             |  |  |  |  |

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

**Division of Corporations** 

P.O. Box 6327 Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



## STONE SOURCE TILE & INSTALLATIONS 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 Li                                      | 06/28/2010                   | and assigned                                      |                             |                         |  |
|---|------------------------------|---|-----------------------------|-------------------------|--|
| Florida document number L10000068   |                              |   |                             |                         |  |
| This amendment is submitted to amend the follow                                       | owing:                       |   |                             |                         |  |
| A. If amending name, enter the new name of  | the limited liab             | ility company her                                 | <u>e</u> :                  |                         |  |
| The new name must be distinguishable and end wit "L.L.C."                             | h the words "Limi            | ted Liability Compa                               | ny," the designation "I     | LC" or the abbreviation |  |
| Enter new principal offices address, if applicable:                                   |                              | 3660 NW Mediterranean Lane                        |                             |                         |  |
| (Principal office address MUST BE A STREET ADDRESS)                                   |                              | Jensen Beach, FL 34957                            |                             |                         |  |
|   | United States.               |   |                             |                         |  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX) |                              | 3660 NW Mediterranean Lane Jensen Beach, FL 34957 |                             |                         |  |
|   |                              | United States                                     |                             |                         |  |
| B. If amending the registered agent and/or the new registered of                      |                              |   | our records, <u>enter t</u> | the name of the new     |  |
| Name of New Registered Agent:   | Jawad Rais                   |   |                             |                         |  |
| New Registered Office Address:  | 3660 NW Mediterranean Lane   |   |                             |                         |  |
|   | Enter Florida street address |   |                             |                         |  |
|   | Je                           | nsen Beach  | . Florida                   | 34957                   |  |
|   | City                         |   |                             | Zip Code                |  |
| New Registered Agent's Signature, if changing F                                       | Registered Agent:            |   |                             |                         |  |

If Changing Registered Agent, Signature of New 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.

- 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 **Type of Action Title** Name 1 Address MGRM **Jawad Rais** 3660 NW Mediterranean Lane Add [7] Remove Jensen Beach, FL 34957 United States Jawad Rais MGRM 3010 MARTA CIRCLE KISSIMMEE, FL 34741 US √ Remove United States Dan Ouellette MGR ✓ Add 1820 NE 23rd Terrace Jensen Beach, FL 34957 ☐ Remove United States ∏Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 18 TH Dated AUGUST Signature of a member or authorized representative of a member JAWAD Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00