L11000050012-

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500215623145

12/29/11--01020--002 **25.00

USEGRETARY OF STATE

T. CLIPET

Elimin

COVER LETTER

TO:	Registration Se Division of Cor						الم المع الم المعلم الد .)
SUBJECT: STONE VENTURE GROUP, LLC						1	, , ,
		Name of Lim	ited Liability Company			_/	P
						/s	د س
The end	closed Articles of	Amendment and fee(s) are su	bmitted for filing.				
Please 1	eturn all correspon	ndence concerning this matte	r to the following:				
			Beverly Blair				
			Name of Person				
Firm/Company							
2362 SE 17th Terrace							
	Address						
	Homestead, FL 33035 City/State and Zip Code						
		t	oblair@virteainc.com				
		E-mail address: (to be used for future annual report notificat	ion)			#21am - 42
For furt	her information co	oncerning this matter, please of	call:			\$11 DEC 29	grandenser griforniss
	Ве	everly Blair	at (305) 25	57-7077	ਜ <u>ੁੰ</u> ਜ		[7]
	Name of	Person	Area Code & Daytime T	elephone Number		68 32 K	Educate By
Enclose	d is a check for the	e following amount:					
₹ \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate Certified C (additional	of Status opy)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STONE VENTURE GROUP, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) 04/28/2011 ____ and assigned The Articles of Organization for this Limited Liability Company were filed on _____ L11000050072 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 Ac	<u>ction</u>				
MGR_	Arista Capital Group, LLC	115 Old Kings Hwy. South Darien, CT 06820	/ Add Remove 					
MGR (PLEASE REMO	Outrigger Investments, Inc.	115 Old Kings Hwy. South Darien, CT 06820	Add Remove _					
			Add Remove					
			Add Remove					
			Add Remove	-2				
D. If amending	g any other information, enter change(s	here: (Attach additional sheets, if necessary)	Remove	Manager Services				
			- - -					
Dated	12/21 , 2011 Signature of a membel or	authorized representative of a member	-					
James M. Reardon, Member Typed or printed name of signee								

Page 2 of 2

Filing Fee: \$25.00