## L13000141252

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



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11/15/13--01013--022 \*\*30.00

11/15/13--01013--021 \*\*60.00

2013 HOV 15 PN 2: 34 SECRETARY OF STATE AND ALLYS CORE FLORIDA

## **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

URIECT: STONE ROSE PRODUCTS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**JEFFREY ROSE** 

Name of Person

STONE ROSE PRODUCTS, LLC

Firm/Company

21346 SAINT ANDREWS BLVD.

Address

**BOCA RATON, FL 33431** 

City/State and Zip Code

jeffrose18@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEFFREY ROSE

561,699-1222

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

C\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

**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
Tallahassec, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2013 NOV 15 PM 2: 34

SEGRETARY OF STATE TALLAHASSEE, FLORIDA

| Stone Kose<br>(Name of the Limited Li<br>(AF   | ability Company as it now appears on orida Limited Liability Company) | our records.)  |
|--|---|--|
| The Articles of Organization for this Limited Liab Florida document number <u>L13000141252</u> | oility Company were filed on 10/07/                                   | and assigned   |
| This amendment is submitted to amend the follow  | ring:   |  |
| A. If amending name, enter the new name of the   | he limited liability company here:                                    |  |
| The new name must be distinguishable and end with t "L.L.C."                                   | he words "Limited Liability Company,"                                 | the designation "LLC" or the abbreviation  |
| Enter new principal offices address, if applicab   | le:   | and the second s |
| (Principal office address MUST BE A STREET   | ADDRESS)  |  |
| Enter new mailing address, if applicable:  |   | A. G. 11 (1) (1) (1) (1)   |
| (Mailing address MAY BE A POST OFFICE BO   | <u></u>   |  |
| B. If amending the registered agent and/or registered agent and/or the new registered office   |   | ecords, enter the name of the new  |
| Name of New Registered Agent:  |   |  |
| New Registered Office Address:   | Enter F   | lorida street address  |
|  |   | , Florida  |
|  | City  | Zip Code   |

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.

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> | Name        | Address               | Type of Action |
|--------------|-------------|-----------------------|----------------|
| MGR          | SEAN GIBSON | 1521 ALTON RD., #844  | _ Add          |
|              |             | MIAMI BEACH, FL 33139 | Remove         |
|              |             |                       | -              |
|              | <del></del> |                       | Add            |
|              |             |                       | Remove         |
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| 11112 | <u>, 2013</u> . |
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Filing Fee: \$25.00

2013 NOV 15 PM 2: 34
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