

# M 76430

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

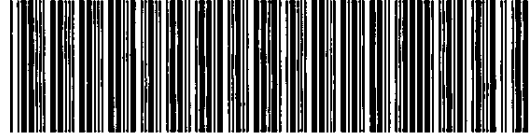
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
15 SEP 22 PM 2:25

SEP 28 2015  
C LEWIS



**Peter W. Shrair**  
*ATTORNEY, MANAGING PRINCIPAL*  
*Admitted in MA and NH*

**DIRECT DIAL**  
413 735 8013

**E-MAIL**  
pshrair@cooleyshrair.com  
www.cooleyshrair.com

September 21, 2015

FILE NO. 25061.006

**BY FEDERAL EXPRESS**

Florida Secretary of State  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: Rockstone Corporation, Inc. – Change of Business Address

Dear Sirs:

Enclosed please find the following:

1. Cover letter;
2. Articles of Amendment to Articles of Incorporation of Rockstone Corporation, Inc.;
3. Check in the amount of \$43.75 to cover the cost of the filing fee for the Amendment to Articles of Incorporation and a Certificate of Status.

I would appreciate it if you would have this forwarded back to us at your earliest convenience.

Very truly yours,

A handwritten signature in black ink, appearing to be "P. Shrair", written over a horizontal line.

PETER W. SHRAIR

PWS/jme  
Enclosures

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Rockstone Corporation, Inc.

**DOCUMENT NUMBER:** \_\_\_\_\_

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter W. Shrair

\_\_\_\_\_  
Name of Contact Person

Cooley, Shrair P.C.

\_\_\_\_\_  
Firm/ Company

1380 Main Street

\_\_\_\_\_  
Address

Springfield, MA 01103

\_\_\_\_\_  
City/ State and Zip Code

pshrair@cooleyshrair.com

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

For further information concerning this matter, please call:

Peter W. Shrair

at ( 413 ) \_\_\_\_\_

735-8013

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

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

**Street Address**

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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

15 SEP 22 PH 2: 25

Rockstone Corporation, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

Rockstone Corporation, Inc.

M76430

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

155 Leonard Street

Agawam, MA 01001

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

155 Leonard Street

Agawam, MA 01001

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent N/A

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

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

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*



**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

N/A

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

N/A

The date of each amendment(s) adoption: \_\_\_\_\_  
date this document was signed.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS

Effective date if applicable: \_\_\_\_\_

15 SEP 22 PM 2: 25

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

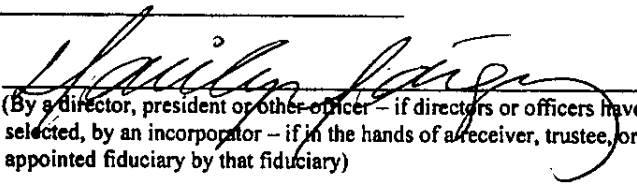
"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated September 21, 2015

Signature

  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Marilyn Marquez Mercado

(Typed or printed name of person signing)

President

(Title of person signing)