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COVER LETTER

TO: Amendment Section Division of Corporations

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Tallahassee, FL 32314

NAME OF CORPORATION: SANTOS Leal Marble + Gravite, Inc
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
J Mullin Services, Juc- (Firm/Company)
SOO NE 5the 2B (Address)
Delrry Beach Fl 33483 (City/State/and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (561) 819 0891 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street

Tallahassee, FL 32399

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	00 11 -
	Articles of Amendment
	Articles of Incorporation
	of 11/4/5/5/20p 47
SANTOS Leal	Articles of Amendment to Articles of Incorporation of AMASSE OF STATE THOMASSE OF STATE OF ST
(Name of corporate	tion as currently filed with the Florida Dept. of State)
P030	00001050
(Doc	ument number of corporation (if known)
ursuant to the provisions of section lopts the following amendment(s) to	607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> o its Articles of Incorporation:
EW CORPORATE NAME (if ch	
Granite	Brazil USA, INC. pany," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
fust contain the word "corporation," "com	pany," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
professional corporation must contain the	e word "chartered", "professional association," or the abbreviation "P.A.")
	THER THAN NAME CHANGE) Indicate Article Number(s) d, added or deleted: (BE SPECIFIC)
	Attach additional pages if necessary)
f an amendment provides for exchar	Attach additional pages if necessary) nge, reclassification, or cancellation of issued shares, provisions not contained in the amendment itself: (if not applicable, indicate N/A
an amendment provides for exchar	nge, reclassification, or cancellation of issued shares, provisions

(continued)

The date of each amendment(s) adoption:i/1/2005		
Effective date if applicable: 1/1/2005 (no more than 90 days after amendment file date)		
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were approved 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. 		
Signature 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)		
(Typed or printed name of person signing)		
President (Title of person signing)		

FILING FEE: \$35