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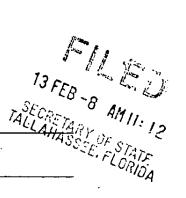


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	CATION:		ESIGN CENTER, INC		
DOCUMENT NUMBER: P04000119475					
The enclosed Articles	of Amendment and fee are sul	omitted for filing.			
Please return all corres	spondence concerning this mat	ter to the following:			
	ONALBER MIR-TOPPE				
		Name of Contact Person	1		
	CRISMAR STONE	& CABINETRY D	ESIGN CENTER, INC		
		Firm/ Company			
	5008 RICHARD L				
	JACKSONVILLE	Address			
	JACKSONVILLE	City/ State and Zip Code			
		•	•		
<u>CR</u>	ISMARSTONE@				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
ONALBER M	IIR-TOPPE	at (904	338-8409		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made p	nayable to the Florida Depa	rtment 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)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Division Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment to **Articles of Incorporation** of



CRISMAR STONE & CABINETRY DESIGN CENTER, INC

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

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nt(s) to

(Documer	t Number of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit	Corporation adopts the following amendme	
A. If amending name, enter the new na	me of the corporation:		
	ation "Corp," "Inc," or "Co". A profes	The new " or "incorporated" or the abbreviation sional corporation name must contain the	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		······································	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida v registered office address: ONALBER MIR-TOPPE	enter the name of the	
Name of New Registered Agent			
	4410 TURNER AVE, JAX FL 32207		
	(Florida street address)		
New Registered Office Address:	(Ctr.)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: ered agent. Lam familiar with and accept	the obligations of the position.	
Si	gnature of New Registered Agent, if change	ing —	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	ONALBER MIR-TOPPE	4410 TURNER AVE
X Add			JACKSONVILLE
Remove			FL 32207
2) Change	P	ROJAS, LEYDI	4410 TURNER AVE
Add			JACKSONVILLE
X Remove			FL 32207
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		,	
6) Change			
Add			
Remove			

). (Be specific)
	
<u> </u>	
	
provisions for implementing the an	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
f an amendment provides for an expressions for implementing the an (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:
provisions for implementing the an	nendment if not contained in the amendment itself:

The date of each amendmen	it(s) adoption: U1/20/2013
Effective date if applicable:	01/20/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	es cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated	02.1041.2013
Signature _	(MOTOVI)
	By a director, president or other officer - if directors or officers have not been
	elected, by an incorporator - if in the hands of a receiver, trustee, or other court
8	appointed fiduciary by that fiduciary)
	Chalber Min-Toppe.
	(Typed or printed name of person signing)
	President.
	(Title of person signing)