P04000167901

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer: OK to USC 5, gnature from Page 4 for name retrace ICHAR. Per Darian Tackson				
4/14/17 VH				

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SECRETARY OF STATE OF STATE OF CORPORATION OF CORPO

V HERRING APR 1 4 2017

4/10/2017

TO: ARTICLES OF AMENDMENT

I AM THE OWNER OF THE COMPANY THAT I AM CHANGING THE NAME TO AND I DONT PLAN ON REINSTATING THE COMPANY AGAIN. I DISSOLUTION THAT COMPANY NAME ON 4/10/17 SO I COULD USE IT TO MAKE THE MANE CHANGE.

LAM CHANGEING D.D.S CORP TO WHITE STONE INVESTMENT PROPERTIES INC.

THANK YOU DARIAN JACKSON

ignature ______(By a director, president or other officer

IF YOU HAVE ANY QUESTIONS PLEASE CALL ME 954 279-7554 954 770 5241

COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: D.D.S COCP					
DOCUMENT NUMBER: P04000 147901					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Darian Jackson Name of Contact Person					
Name of Contact Person					
Firm/ Company					
12184 NW 35P					
Address					
Schrise A 33323 City/State and Zip Code					
City/ State and Zip Code					
B/gcKJack 2776@ be//Sath. net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Darian Jackson at (95 y) 770 52 41 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 Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2017 APR 13 PM 2: 05

D. D. S Cori	
· · · · · · · · · · · · · · · · · · ·	y filed with the Florida Dept. of State)
P04000167901	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: White Stone Investment name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation"	n," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 451178 SUNCISE F1 33345
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	reet address)
	(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 I	Registered Agent, if changing

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.

Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address (
1)Change		- A
Add		<u> </u>
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		
Řemove		
4) Change		
Add	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	101.
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

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amendment p	rovides for an exchange, reclassification, or cancellation of issued shares,	
i <mark>sions for imp</mark> if not applicat	lementing the amendment if not contained in the amendment itself: le, indicate N/A)	
	1 - A	
	\ \\	
	1	

The date of each amendment(s) adopted date this document was signed.	n:	11	, if other than the
Effective date if applicable:	(no more than 9	00 days after amendment	file date)
	(no more man	o aays ajier amenamem	me uure)
Note: If the date inserted in this block document's effective date on the Department		cable statutory filing req	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		e number of votes cast for	the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each			
"The number of votes cast for th	e amendment(s) was/we	re sufficient for approval	
by	(voting group)	- <u></u> -	
	(voting group)		
The amendment(s) was/were adopted action was not required.	by the board of directors	s without shareholder acti	on and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators with	nout shareholder action as	nd shareholder
Dated	A 4/10/201	<u> </u>	
Signature			
selected, by		cer – if directors or office te hands of a receiver, true)	
	Dacian (Typed or printed	name of person signing)	
		2 President	
	(Title	of person signing)	