## P0500005167

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

4 APR 14 AM 9: 19

C. LEWIS

APR 22 2014

EXAMINER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SWEARING	GEN CUSTOM S	TONE, INC.		
DOCUMENT NUMBER: P05000005167					
	of Amendment and fee are su				
Please return all corre	spondence concerning this ma	tter to the following:			
	•	v			
	KATHLEEN SWE	ARINGEN			
	OMEADINGEN	Name of Contact Person			
	SWEARINGEN CUSTOM STONE, INC.				
	26142 LEEWADE	Firm/ Company			
	26143 LEEWARI	Address			
	EUSTIS, FL. 327				
	200110,12.027	City/ State and Zip Code	<del> </del>		
		5.1.j. 2 a 2.p 3345			
	F-mail address: (to be us	sed for future annual report n	notification)		
	D-man address, (to be de	sed for facuse aimidal report is	otification)		
For further information concerning this matter, please call:					
HELEN JON	ES	407	461-9286		
	of Contact Person	at ( Area Cod	e & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depar	tment 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)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Divisior Clifton I 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301		

APPROVED AND

## Articles of Amendment to Articles of Incorporation

14 APR 14 AM 9: 19

SWEARINGEN CUSTOM STONE, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of Corporation as currently filed with the F	lorida Dept. of State)
P05000005167	,
(Document Number of Corporation (i	fknown)
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:	
NA	The new
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)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address  Name of New Registered Agent  NA	
(Florida str	eet address)
New Registered Office Address: (City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar v	· · · · · · · · · · · · · · · · · · ·
Signature of New 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	<u>PT</u>	John Doe		
X Remove	V	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	S	MICHAEL NISSEN	PO BOX 438	
Add			SORRENTO,FL	
Remove			32776	
2) Change	S	MARK BOVARD	PO BOX 438	
Add			SORRENTO, FL	
Remove			32776	
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove			<del></del>	

(Attach additional sheets, if necessary).	(Be specific)
A	
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
A	
	· • • ·

## APPRUYLI ANO FILED

The date of each amendment(s) adoption:	14 APR 14 AM 9: 19	, if other than the
date this document was signed.	SECRETARY OF STATE	
Effective date if applicable:	TALLAHASSEL, PLUKIDA	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) approval.	
	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
	dment(s) was/were sufficient for approval	
by	ing group)	
(vot	ing group)	
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
Dated 04/09/2014 Signature		
(By a director, press selected by an inco appointed fiduciary	ident or other officer – if directors or officers have not been or	
KATHLE	EN SWEARINGEN	
	(Typed or printed name of person signing)	<del></del>
VICE PR	RESIDENT	
· ·	(Title of person signing)	<u> </u>