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(Re	equestor's Name)	
(Ac	ldress)	
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TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: NUMBER: POS (XXXX)	5 Floors 8 Stones, Corp. 1593
The enclosed Articles of Amendment and fee are sul	hmitted for filing
•	-
Please return all correspondence concerning this mat	ter to the following:
Daypr	Name of Contact Person
Nuncs	Floors & Stones Corp.
4535	10th St NE
Naple	S. Fl 34120
	Ćity/ State and Zip Code
nwests	@ichad. (om
E-man address. (to be us	ed for future annual report notification)
For further information concerning this matter, please	e call:
Dayants Nuncs	at (239) 595-2744
•	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 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

	Articles of incor	poration		
Nunes	Floors	e Stones	Corp.	
(Name of Corpor	ation as currently i	iled with the Florida Dept.	of State)	
70500	M57593			
(Do	cument Number of C	orporation (if known)		
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this Fl	orida Profit Corporation ad	opts the following amend	dment(s) to
A. If amending name, enter the new name of the	e corporation:	rion Corp.	The	new
name must be distinguishable and contain the			rated" or the abbrevia	tion
"Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the designation of the chartered of the company of the chartered of the company of the chartered			tion name must contain	the
B. Enter new principal office address, if applica		4535 10th	st NE	
(Principal office address MUST BE A STREET A		Innas El	31197	_
•	•		$\frac{900}{}$	
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)			_ _
D. If amending the registered agent and/or registered new registered agent and/or the new register		s in Florida, enter the nam	e of the	_
Name of New Registered Agent	_			
	(Florida street	address)		
New Registered Office Address:			Florida	
new registered Office radiress.	(C	ity)	(Zip Code)	_
			15 OC	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen		h and accept the obligations	of the positions	<u> </u>
т негеоу ассерт те арронитен as regisierea agen	i. 1 am jamutar wu	и ана ассері іне обиданонѕ	of the position: 2 AN 7:	
S	ignature of New Reg	istered Agent, if changing	7	

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:	, una su	uy 5min, 57 us un Auu.	
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			
Add			
Remove			
2) Change			
Add			
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3) Change			
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4) Change			
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5) Change			
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Remove			-
6) Change			
Add			
Damaua			

	(Be specific)
	•
<u> </u>	
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f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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, thi document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust be separately provided for each voting group entitled to vote separately on the amendment(s):	tement
"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 shareh action was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required.	r
Dated	
Signature All March 1995	
(By a director, president or other officer - if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	court
David (2 a Million of	
- Muans Nones	·
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	