P06000047-636

| (Requestor's Name) |
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| , , , |
| (Address) |
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| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| (Document Namber) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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03/11/21--01008--006 **35.00



A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COR | PORATION: NATURAL STON | E INSTALLATIONS INC | | | |
|------------------------|--|--|---|--|--|
| | FMBER: P06000047630 | | | | |
| | des of Amendment and fee are su | bmitted for filing. | | | |
| Please return all co | orrespondence concerning this ma | tter to the following: | | | |
| | ROSEMARY ZALDANA | | | | |
| | Name of Contact Person | | | | |
| | NATURAL STONE INSTALLATIONS INC | | | | |
| | Firm/ Company | | | | |
| | 2832 ROCK SPRINGS RD | , , | | | |
| | | Address | | | |
| | APOPKA, FL 32712 | | | | |
| | | City/ State and Zip Code | 8 | | |
| | naturalstone2003@aol.com | | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | | |
| For further inform | ation concerning this matter, pleas | se call:at (321 | 229-7317 | | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | | |
| Enclosed is a chec | k for the following amount made | | | | |
| S35 Filing Fee | ©\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| , 1 | Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314 | Amend Divisio The Co 2415 N | Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303 | | |

Articles of Amendment Articles of Incorporation of

| N'ATTIDAT | CHONG INCTALLATIONS INC. | |
|-----------|--------------------------|--|

| as currently filed with the F | lorida Dept. of State) |
|--|---|
| | |
| nt Number of Corporation (if k | nown) |
| tatutes, this Florida Profit Cor | rporation adopts the following amendment(s) t |
| ocration: | |
| | The new |
| | orporated" or the abbreviation "Corp.," rporation name must contain the word |
| | |
| <u>ESS</u>) | |
| - | |
| | |
| l office address in Florida, en lice address: | iter the name of the |
| | |
| | |
| (Florida street address) | |
| | , Florida |
| (City) | (Zip Code) |
| ered Agent: m familiar with and accept the | obligations of the position. |
| | |
| re of New Registered Agent, if | chanaina |
| | at Number of Corporation (if k tatutes, this Florida Profit Consoration: oration: oration: oration: oration "Company," or "ine or "Co". A professional contion "P.A." ESS) office address in Florida, endice address: (Florida street address) (City) ered Agent: m familiar with and accept the |

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | S | EDGAR ERNESTO, JR. ZALDANA | 2832 ROCK SPRINGS RD |
| X Add | | | APOPKA, FI. 32712 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | 1 10 |
| 6) Change | | | |
| Add | | | |
| | | | |
| Remove | | | |

| (Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
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| If an amendment provides for an exch | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | nument it not contained in the amendment users. |
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| | 2/26/2021 | |
|--|---|--|
| The date of each amendment(s) | adoption: | , if other than the |
| date this document was signed. | | |
| | 6/2021 | |
| Effective date <u>if applicable</u> : | (no more than 90 days at | ier amendment file date) |
| | | |
| Note: If the date inserted in this document's effective date on the I | | utory filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were action was not required. | lopted by the incorporators, or board of | directors without shareholder action and shareholder |
| ☐ The amendment(s) was/were ad by the shareholders was/were s | dopted by the shareholders. The number sufficient for approval. | of votes east for the amendment(s) |
| | proved by the shareholders through voti r each voting group entitled to vote sepa | |
| "The number of votes cas | t for the amendment(s) was/were suffici | ent for approval |
| bv | | ." |
| | (voting group) | |
| DatedSignature | 2/26/2021. | |
| select | director, president or other officer – if di ed, by an incorporator – if in the hands o nted fiduciary by that fiduciary) | |
| | Rosemary Zaldana | |
| | (Typed or printed name of p | person signing) |
| | President | |
| | (Title of person signing) | |