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Certified Copies	_ Certificates	of Status
Special Instructions to		
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Office Use Only



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AUG 2 7 2014 C. CARROTHERS

COVER LETTER

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TO: Amendment Section Division of Corporations NAME OF CORPORATION: Paver stone inc. DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ver Stone in C Pinelias Fark Fr City/ State and Zip Code enier @ Paverstone in C. Com
ess: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

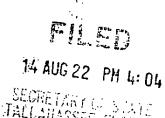
Mailing Address

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 to
Articles of Incorporation



w adopts the following amendmen
adopts the following amendmen
adopts the following amendment
The new
orporated" or the abbreviation poration name must contain the
name of the
_
_
ida

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
Change Add Remove	D	<u>Gender Dashva</u>	1410 Tyrone Budn St. Retersburg, FC 33710
2) Change			
Remove 3) Change Add			
Add			
Change Add Remove			
6) Change Add Remove			

amending or adding additional stack additional stack additional sheets, if necessor	ary). (Be spec	rific)	A A		
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an amendment provides for an	exchange reci	essification o	r concellation o	of icenad charge	
provisions for implementing the	e amendment if	not contained	in the amendn	ient itself:	
(if not applicable, indicate N	/A)				
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The date of each amendment(s) adoption: 8/18/2014 date this document was signed.	_, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
ne amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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 shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8-18-2014	
Signature (By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed aductary by that fiduciary)	
Robson Dasi wa (Typed or printed name of person signing)	
Prosicion	
(Title of person signing)	

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