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| (Re | equestor's Name) | | | |
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| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL MAIL | | |
| (Bu | siness Entity Nar | ne) | | |
| (Do | ocument Number) | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE

JUN 29 2015 T CANNON

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: | PAVONI STONE | , INC | | | | |
|--|--------------------------------------|--|--|--|--|--|
| P06000119660 P06000119660 | | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | | |
| Please return all correspondence | concerning this ma | tter to the following: | | | | |
| | | PEDRO PABLO PAVON | II | | | |
| | Name of Contact Person | | | | | |
| | | PAVONI STONE, INC | | | | |
| Firm/ Company | | | | | | |
| | | 14454 SW 165TH TER | | | | |
| Address | | | | | | |
| | MIAMI, FL 33177 | | | | | |
| | | City/ State and Zip Code | e | | | |
| | | pavoniservices@gmail.co | om | | | |
| E-ma | il address: (to be us | sed for future annual report | notification) | | | |
| For further information concerning | ng this matter, pleas | se call: | | | | |
| PEDRO PABLO | PAVONI | at (| 790-1976 | | | |
| Name of Contact | Person | Area Co | de & Daytime Telephone Number | | | |
| Enclosed is a check for the follow | ving amount made | payable to the Florida Depa | urtment of State: | | | |
| | 3.75 Filing Fee & tificate 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) | | | |
| Mailing Addre | | | Address | | | |
| Amendment Se | | | ment Section | | | |
| Division of Co | | | on of Corporations | | | |
| P.O. Box 6327 Tallahassee, FI | | | Building xecutive Center Circle | | | |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

PAVONI STONE, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P06000119660

(Document Number of Corporation (if known)

| | (Document Number of Co | orporation (ii known) | | | |
|--|--|-------------------------------|------------------|------------|--|
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 006, Florida Statutes, this <i>Flo</i> | rida Profit Corporation adop | ts the following | ng ame | endment(s) |
| A. If amending name, enter the new na | me of the corporation: | | | | |
| | | | | The | new |
| name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associated | ation "Corp," "Inc," or "Co | ". A professional corporation | | abbrev | |
| B. Enter new principal office address, i (Principal office address MUST BE A ST | | | | | |
| C. Enter new mailing address, if applie (Mailing address MAY BE A POST C | | | | | |
| D. If amending the registered agent and new registered agent and/or the new | | in Florida, enter the name | of the | | |
| Name of New Registered Agent | JOSE AGUSTIN PLASENO | CIA | _ <u></u> | _ | |
| | 9954 SW 88TH ST, APT:21 | 1 | | | |
| | (Florida street | address) | | _ 5 | TAT SE |
| New Registered Office Address: | MIAMI | F | 33176 lorida | ĮĮ, | CRE |
| New Registered Office Madress. | (Ci | | • | Gode) ∞ | TAR 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| New Registered Agent's Signature, if ch I hereby accept the appointment as registe | | and accept the obligations o | f the position. | PH 4: 06 | .EO 1 OF STATE EE, FLORIDA |
| | Aqualise Signature of New Reed | stered 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 <math>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) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | T | ORLANDO MORALES | 3188 SW 26 ST |
| Add X Remove | | | MIAMI, FL 33133 |
| 2) Change | T | JOSE AGUSTIN PLASENCIA | 9954 SW 88TH ST, APT:211 |
| X Add | | | MIAMI, FL 33176 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | SE SE |
| 4) Change Add | _ | _ | JUN 18 PH |
| Remove | | | F: CO |
| 5) Change Add | | _ | ATE RIDA 06 |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | |
|--|--------------|-------------|
| N/A | | |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, | 8 | S |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | 公公 |
| | PH | 1. J |
| N/A | ት: 06 | <u>: S</u> |
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| The date of each amendment(s) adoption: | 06/08/2015 | , if other than the |
|--|--|-----------------------------|
| date this document was signed. | | , ii onioi than the |
| , in accomment the righter. | 06/17/2015 | |
| Effective date if applicable: | | |
| (no i | more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not mee document's effective date on the Department of State's | et the applicable statutory filing requirements, this date will s records. | not be listed as the |
| Adoption of Amendment(s) (CHECK | ONE) | |
| ☐ The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approve | olders. The number of votes cast for the amendment(s) al. | |
| ☐ The amendment(s) was/were approved by the share must be separately provided for each voting group | cholders through voting groups. The following statement of entitled to vote separately on the amendment(s): | |
| "The number of votes cast for the amendment | | |
| by(voting gr | " | |
| (voting gr | oup) | . 7. |
| | of directors without shareholder action and shareholder | FIL SECRETAR ALLAHASS |
| ☐ The amendment(s) was/were adopted by the incorp action was not required. | orators without shareholder action and shareholder | RY OF |
| Dated 06/08/2 | 2/5 /// | ED STATE OF STATE |
| Signature | Thereof the same of the same o | _ |
| | or other officer – if directors or officers have not been tor – if in the hands of a receiver, trustee, or other court | |
| appointed inductary by the | at fiducially) | |
| | PEDRO PABLO PAVONI | |
| (Typed | d or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |