P06000129085

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

Office Use Only



400164967354

01/11/10--01025--013 **35.00

10 JAN II AN IO: 57

J. 1/30

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: <u>ULtimate</u> Granite INC P06000129085 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Steve Fergadiotis ULTIMATE GrANITE INC. 403 E Beacon ROAD LAKELAND Florida 33803 City/ State and Zip Code ULtimate grante @ yahoo. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: As Steve Fergadiatis at (813) 247- 4057

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & □ \$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is 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 of

(Name of Corporation as currently filed with t	he Florida De	pt. of State)				
ULTIMATE G (Document Number of Corporation	ranite,	INC.				
(Document Number of Corporation	on (if known) '					
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florid</i>	a Profit Corpo	vration add	opts the	: follo	owing
A. If amending name, enter the new name of the corporation	<u>1:</u>					
				The	new	
name must be distinguishable and contain the word "corpe abbreviation "Corp.," "Inc.," or Co.," or the designation "Co name must contain the word "chartered," "professional associa	orp," "Inc," or	r "Co". A pro	ofessional d	ed" or	the	
B. Enter new principal office address, if applicable:	SAM	e				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	403	E Bei	<u> </u>	ND		
	(A1	FELAND	FIA	338 -	-US	,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				SECTION 1	10 JAN I	न्यु
D. If amending the registered agent and/or registered office	address in Flo	orida, enter the	e name of	the	<u> </u>	HED.
new registered agent and/or the new registered office add Name of New Registered Agent:	ress:	(SAME)	, , ,	FLORIDA	AH 10: 57	(i)
New Registered Office Address: (Florid	da street addre	ess)				
		Flo	orida			
(City)		(Zip Code				
New Registered Agent's Signature, if changing Registered Agent the appointment as registered great Law family					•	
I hereby accept the appointment as registered agent. I am famil	iar wiin ana a	ccept the obliga	uions of th	e positi	on.	
Signature of New	Registered Age	ont 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)

<u>Title</u>	Name	Address	Type of Action
<u>SD</u>	ABINUM, MAIKO	403 E BCUCONBD 146614ND F14 33803	Add Remove
			☐ Add☐ Remove
			Add Remove
(attach addit	g or adding additional Articles, enter c	c)	polote
	ABINUM, MAIKO This WAS MIS ABINUM, MAIKO COMPANY. Please	10165 011 0110	Pact
	AD III MAS MIS	TAKE OF OUT	
	ABINUM, MAIRO	NOIDZ NO Z	MARES IN
	Campany. Please	- remove From	
provisions	ndment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)		
	<u> </u>		
SD	ABINUM, MAIK	o 12 Emove	- Delete
	This WAS MIST	take on our	Part
	+BINUM, MAIKO	hulds NO S	HARES IN
	COMPANY. Plea	ise remove A	BINUM, MAIKO

The date of each amendment(s) adoption: 10-19-09
Effective date if applicable:	(date of adoption is required)
Enective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
The amendment(s) was/wer must be separately provided	e approved by the shareholders through voting groups. The following statemer for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by <u>ULtim</u>	ate Grante Inc. " (voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	10-19-09
selec	a director, president or other officer – if directors or officers have not been cted by an incorporator—if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Steve Fergadiotis
	(Typed or printed name of person signing)
	President
	(Title of person signing)