## P0800035054

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(business chuty Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: OCEAN ART DECO & STONE INC.		
DOCUMENT NUMBER: P080000	350504	0
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this i	matter to the following:	
MARTHA C.	PALACIOS (R.A.) Contact Person)	
(Tame of	Contact Totality	
OCEAN AF	RT DECO & STONE INC.	
(Firm/	(Company)	
	NW 17 AVE	
(A	ddress)	
	FLORIDA. 33142 e and Zip Code)	
For further information concerning this matter, pl		
MARTHA C. PALACIOS	at ( <u>305</u> ) <u>219-2230</u>	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount mad	de payable to the Florida Department of State:	
\$35 Filing Fee \$Certificate of Status	S43.75 Filing Fee & S52.50 Filing F Certified Copy Certificate of S (Additional copy is enclosed) (Additional Copy is enclosed)	tatus
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

# OCEAN ART DECO STONE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P08000035054 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

-
ress in Florida, enter the name of the

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

A. If amending name, enter the new name of the corporation:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

N/A

N/A

Signature of New Registered Agent, if changing

(Florida street address)

(City)

Florida\_

(Zip Code)

### 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>	<u>Name</u>	Address	Type of Action
TREAS	LEONARDO CARRASCOSA	2117 NW 17 AVE MiAMI, FL. 33142	🖸 Add Remove
	ling or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
provisio	nendment provides for an exchange, rons for implementing the amendment ot applicable, indicate N/A)		
N/A (NO	O SHARES )		
		<del></del>	•

The date of each amendmen	t(s) adoption: MARCH 24th. 2009
Effective date if applicable:	March 24th; 2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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 President.	."
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Signature _, (By sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	MARCOS PALACIOS ( Pres )  (Typed or printed name of person signing)
	President (Title of person signing)