

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000000251

Entity Name: STONES INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1690 SHARKEY ST.  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

**Current Mailing Address:**

1690 SHARKEY ST.  
TALLAHASSEE, FL 32304

**New Mailing Address:**

FEI Number: 80-0324613

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHECTER, EVAN  
1690 SHARKEY ST.  
TALLAHASSEE, FL 32304 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EVAN SCHECTER

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHECTER, EVAN  
Address: 1690 SHARKEY ST.  
City-St-Zip: TALLAHASSEE, FL 32304

Title: PD  
Name: SUAREZ, GABRIEL  
Address: 1690 SHARKEY ST.  
City-St-Zip: TALLAHASSEE, FL 32304

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EVAN SCHECTER

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

04/29/2011

\_\_\_\_\_  
Date