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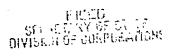
**C LEWIS** 

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: SEASHORE GRANITE INC
DOCUMENT NUMB	ER:
,	f Amendment and fee are submitted for filing.
Please return all corresp	condence concerning this matter to the following:
• .	ROBERTA SILVA
	Name of Contact Person SEASHORE GRANITE INC.
	Firm/ Company 1851:57TH STREET
· · · · · · · · · · · · · · · · · · ·	Address SARASOTA FL 34243
iony@	City/ State and Zip Code
For further information	E-mail address: (to be used for future annual report notification)  concerning this matter, please call:
ROBERTĂ SILVA	at (941 ) 351,-6178
	f Contact Person Area Code & Daytime Telephone Number the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee	Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy  (Additional Copy is enclosed)
Ame Divis P.O.	ing Address Indiment Section Indianated Ind

## Articles of Amendment to; Articles of Incorporation of



15 NOV -2 AM 7: 54

SEASHORE GRANITE INC		<del></del>	
	of Corporation as current	y filed with the Flor	ida Dept. of State)
P09000014612	• • • • • • • • • • • • • • • • • • •	·	
, , , , , , , , , , , , , , , , , , , ,	(Document Number o	f Corporation (if know	wn)
Pursuant to the provisions of section 607 ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpo	ration adopts the following amendment(s
A. If amending hame, enter the new na	me of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp!","Inc," or "	'Co". A professiona	"incorporated" or the abbreviation
B. Enter new principal office address,	if applicable:		
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
$(\mathbf{x}_{i}, \dots, \mathbf{x}_{i}) \in \mathbb{R}^{n}$	• • •		
. •		t	
C. Enter new mailing address, if appl	cahle:		
(Mailing address MAY BE A POST		* · · · · · · · · · · · · · · · · · · ·	
•	•	,3 21;	
-		31111	
D. If amending the registered agent ar	id/or registered office add	ress in Florida, enteï	r the name of the
new registered agent and/or the ne	w registered office address	31	
Name of New Registered Agent	ROBERTA SILVA		
Name of New Register Eurigent	1851 57TH STREET		· · · · · · · · · · · · · · · · · · ·
		reet address)	<del></del>
	SARASOTA,		_= 34243
New Registered Office Address:	<u> </u>	(City)	, Florida(Zip Code)
•		(City)	(Lip Gode)
•	•		
New Registered Agent's Signature, if o	hanging Registered Agent	<b>!!</b> '	
l hereby accept the appointment as regis			bligations of the position.
·	* **	•	•
	·		
X			
· · · · · · · · · · · · · · · · · · ·	Signature of New 1	Registered Agent, if c	hanging

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	<u>Name</u>	<u>Addres</u> š
1) X Change	PRES	ROBERTA ŠIĻVA	1851:57TH'ST
Add		A Property Company Com	SARASOTA FL 34243
Remove,			<del></del>
2) Change	PRES	JOHN DINSMORE	1851 57TH ST
Ädð			SARASOTA FL 34243
X Remove			, , , , , , , , , , , , , , , , , , ,
3)Change;			
Add	t	·	
Remove			,
4) Change	<del></del> -		
Add;		· · · · · · · · · · · · · · · · · · ·	
Remove			* * * * * * * * * #
5). Change			
Add,		<del></del> ;	
Remove,			
		•	
6) Change			,
Add			<del></del>

If amending or adding additional Ar Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an exc provisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
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If an amendment provides for an exc provisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
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If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
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If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:

The date of each amendment(s)	adoption:		if other than th
late this document was signed.		กเข้า	Sicil of currention
1(	0/26/2015	-	
Effective date if applicable:	(no more than 90 de	tys after amendment file date)	HOV -2 AM 7:54
Note: If the date inserted in this locument's effective date on the	block does not meet the applicable		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The nu- sufficient for approval.	mber of votes cast for the amen	dment(s)
The amendment(s) was/were a must be separately provided f	pproved by the shareholders through	n voting groups. The following separately on the amendment	statement (s):
"The number of votes ca	st for the amendment(s) was/were.st	ifficient for approval	
by	v	**	
	(voting group)		
action was not required.	dopted by the board of directors wit		
10/26/20 Dated	15:	<del></del> .	
Signature X	1		
(By a selec	director, president or other officer- ted, by an incorporator - if in the ha inted fiduciary by that fiduciary)		
•	ROBERTA SILVA		
	(Typed or printed nam	e of person signing)	
* 4	PRESIDENT'	·	
	(Title of p	erson signing);	<del></del>