# PO9000018838

	(Requestor's Name)	
	(Address)	
	(Address)	·
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT	MAIL
(Business Entity Name)		
	(Document Number)	
Certified Copies	Certificates of S	Statu <b>s</b>
Special Instructions	s to Filing Officer:	

Office Use Only

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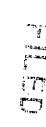


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#### **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: WHITE STONE GROND INC DOCUMENT NUMBER: P09000079939 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person WHITESTONE GROWP INC. 1680 MERIDIAN AVE #8301
Address MIAM FL 33139 City/State and Zip Code JULIE @ DSLABORATORIES. (OM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person at (407) 341 017-9

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & **☐**\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

# 30/0 SEP 20 AM 8:50 **Articles of Amendment** to **Articles of Incorporation**

(Name of Corporation as curre		Dept. of State)	
P09∞00 =	18838		C. P.C.
(Document Num	ber of Corporation (if know	n)	·
rsuant to the provisions of section 607.1006 nendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Fla	rida Profit Corporation	n adopts the fol
If amending name, enter the new name of	the corporation:		
			The new
me must be distinguishable and contain t breviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "proj	designation "Corp," "Inc,	" or "Co". A profession	
Enter new principal office address, if application of the control			<del></del>
	·		
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>		
If amending the registered agent and/or r	egistaved office address in	Florida antar the nam	o of the
new registered agent and/or the new regis		rioriua, enter the nam	ie of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street ad	ldress)	
		, Florida	
•	(City)	(Zip Code)	<del></del>
ew Registered Agent's Signature, if changing	ng Registered Agent:		
ereby accept the appointment as registered a		d accept the obligations	of the position.
$\overline{S}$	ignature of New Registered	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)

<u>Title</u>	<u>Name</u>		Address	Type of Action
	EZIO DA	FONSE	(A 1680 Meridia AVE #301 MIAM FL	
	g or adding additional Artitional sheets, if necessary).			
	At	tret	ment	
		÷		<u></u>
provisions	ndment provides for an exc for implementing the ame applicable, indicate N/A)			
				****
	1941 to 184			
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# WHITESTONE GROUP, INC.

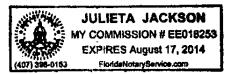
## **OFFICER'S CERTIFICATE**

The undersigned, ABNER SILVA, in his capacity as Director and Chief Executive Officer of Whitestone Group, Inc., a Florida corporation (the "Company"), does hereby certify that attached hereto as Schedule 1 is a true and accurate list of the officers and directors and sole shareholder of the Company as of the date hereof.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand this day of September, 2010.

Abner Silva

State of County of County



## Schedule 1

## **Officers and Directors**

Julie Jackson – Company Secretary

Ezio Da Fonseca – Vice President

Shareholder

Abner Silva (sole shareholder)

State of COLDA

County of County of

JULIETA JACKSON MY COMMISSION # EE018253 EXPIRES August 17, 2014

FloridaNotaryService.com

The date of each amendment	(s) adoption:
Effective date <u>if applicable</u> :	(date of adoption is required)
месте часе <u>н аррисари</u> .	(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	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
, ,	re approved by the shareholders through voting groups. The following statemend 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	(voting group)
	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated	3ept-17-2010
Signature	
sele	a director, president or other officer – if directors or officers have not been octed, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	GEO
	(Title of person signing)