

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		<u></u> -

Office Use Only



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Jame Chang

APR 0 4 2024 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: SK STONES INC			
	IBER: P11000021729			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	DEBORA WILDER			
	·	Name of Contact Person	_	
	THE WILDER GROUP			
		Firm/ Company	_	
	4020 PARK ST N. SUITE 10	03		
	 	Address		
	SAINT PETERSBURG, FL.	33709		
		City/ State and Zip Code		
	deb@thewildergroup.com			
	E-mail address: (to be us	sed for future annual report notification)		
For further informati	on concerning this matter, pleas	se call:		2024 K.E.R
DEBORA WILDER		at () 466-9575	- ; ;	-8
Name of Contact Person Area Code & Daytime Telephone N		iber 📜		
Enclosed is a check t	or the following amount made	payable to the Florida Department of State:		MH 11: 33
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	177	SS
An Dir P.C	niling Address mendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

SK STONES INC		
	ration as currently filed with the Florida Dept. of State)	
P11000021729		
(Do	cument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the follow	ving amendment(s)
A. If amending name, enter the new name of the	e corporation:	
STONE KING USA INC		The new
	"corporation," "company," or "incorporated" or the abbrevionc," or "Co". A professional corporation name must combreviation "P.A."	ation "Corp.,"
B. Enter new principal office address, if applica		
(Principal office address <u>MUST BE A STREET A</u>	(DDRESS)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	ROV	
mailing duaress <u>MAT BE AT OST OT FFEE</u>	<u></u>	
		<u>. : : 22</u>
	stered office address in Florida, enter the name of the	
new registered agent and/or the new register	ed office address:	/! do }
Name of New Registered Agent		1.6
	(Florida street address)	ω
New Registered Office Address:	, Florida	.n
	(City) (Z	(ip Code)
New Registered Agent's Signature, if changing I	Registered Agent:	
I hereby accept the appointment as registered agen	at. I am familiar with and accept the obligations of the positio	en.
Si	ignature of New Registered Agent, if changing	
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		-
Add				
Remove				

Attach addition	adding additional Ar ul sheets, if necessary).	(Be specific)				
	,			-		
					· ·-	
	<u> </u>	-				
	<u> </u>					
				,		
					•	
	,, <u> </u>					
provisions for	nt provides for an exc implementing the am licable, indicate N/A)	hange, reclassificendment if not co	cation, or cancel ontained in the a	llation of issued amendment itsel	shares, lf:	
	•					

	loption:	it other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	data)
	(no more than 50 days after amenament fue	uure)
Note: If the date inserted in this b document's effective date on the Do	lock does not meet the applicable statutory filing require spartment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pied by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the fficient for approval.	ne amendment(s)
	proved by the shareholders through voting groups. The fole each voting group entitled to vote separately on the amen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
FEBRUAR	Y 16, 2024	
Dated		
Signature	2. L · V	
	irector, president or other officer - if directors or officers l	have not been
	d, by an incorporator – if in the hands of a receiver, trustee	e, or other court
appoin	ted fiduciary by that fiduciary)	
	WALID AHMED	
	(Typed or printed name of person signing)	
	Pres.	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·