P11000091375

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	KINGDOM STONE IN	'C				
DOCUMENT NUMBER:	P11000091375					
The enclosed Articles of Amenda	nent and fee are submitted	for filing.				
Please return all correspondence of	concerning this matter to th	e following:				
	KEVIN	ALMENDARES				
	Name	of Contact Person				
	KINGDO	M STONE INC				
	Ī	irm/ Company				
	2037 J&C BLVD					
	Address					
	NAPLES,FLORIDA 34109					
	City/	State and Zip Code				
CASAHIS	PANADEMULTISERVIC	IOS@GMAIL.CON	[
E-mai	l address: (to be used for fi	nure annual report n	otification)			
For further information concerning	g this matter, please call:					
ROBERTO ARGUELLO		239 at (682-2538			
Name of Contact I	erson		e & Daytime Telephone Number			
Enclosed is a check for the follow	ring amount made payable	to the Florida Depar	tment of State:			
	, , , , , , , , , , , , , , , , , , , ,					
9	ificate of Status Cer (Add	.75 Filing Fee & tified Copy litional copy is losed)	☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division The Cer 2415 N	ddress nent Section of Corporations ntre of Tallahassee . Monroe Street, Suite 810 see, FL 32303			

Articles of Amendment to Articles of Incorporation \mathbf{of}

KINGDOM STONE INC

(Name of Corporation as curren	itly filed with the Florida Dept, of State)
P11000091	375
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	W
	<i>\(\)</i>
	
C. Enter new mailing address, if applicable:	-
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
	•
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	
Signature of New	Registered Agent. if changing
Charle if amaliantia	

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)

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>oc</u>	
X Remove	<u>V</u>	Mike Jo	enes	
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	<u>s</u>		KARLA ARGUELLO	4523 CORAL PALM LN # 3
Add				NAPLES,FLORIDA 34116
X Remove 2) Change		_	 	
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		_
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach ada	ig or adding additional Ar litional sheets, if necessary).	(Be specific)	<u></u>		
					· · · · · · · · · · · · · · · · · · ·
					
					
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<u>f an amer</u> provision	ndment provides for an exc is for implementing the an	<u>:hange, reclassifica</u> endment if not con	<u>tion, or cancellation</u> tained in the ame	on of issued shares, adment itself:	
(if no	t applicable, indicate N/A)				
					
					

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	08/10/2020	
The date of each amendment date this document was signed.	s) adoption:	, if other than the
Effective date if applicable:	08/11/2020	
	(no more than 90 days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements to Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	e adopted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the ame re sufficient for approval.	indment(s)
	c approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated <u>C</u> Signature	8/13/2020	
(By sel	e director president or other officer – if directors or officers have n ected, by an incorporator – if in the hands of a receiver, trustee, or of pointed fiduciary by that fiduciary)	
·	KEVIN ALMENDARES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	