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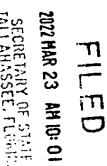
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BYOWNSTONE HOSPITALITY INTERIORS. INC
0.0000000000000000000000000000000000000
DOCUMENT NUMBER: <u>P11 000 0 994 2 4</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Briana Lawicy Name of Connect Person
Brownstone HOSpitality Interiors INC.
7509 Exchange Drive
Or VOI VAO FLORIDA 32809 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bri and Lanuy at (H07) 299 · 2719 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

Promostone Hospitality Interiors INC. Fix \$
(Name of Corporation as currently filed with the Florida Dept. of State)
V11 0000 9447
(Document Number of Corporation (if known) SA
Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following and includes its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
N/A The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent BYI ANA LAWUY
7509 Exchange Drive (Florida street address)
New Registered Office Address: OY \ON OO . Florida 32809 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
B. Jawley Signature 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> <u>John</u>	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>vp/5</u>	Briana Lawley	7509 Exchange Dr.
Add Remove			<u>Orlando FL. 32809</u>
2) X Change	T/q	Brian Lawley	7509 Exchange Dr Orvando FL 32809
Add			Urvinau FL 32809
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u>-</u> _		
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment j	provides for an exc plementing the am	hange, reclas	sification, or ca	incellation of is	sued shares,	
(if not applica	thle, indicate N/A)	enument i <u>i ii</u>	n Comameu m	the amenomen	(1tsen.	
		NA	_			
		1				
						
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The date of each amendment(s) date this document was signed.	adoption:3/1	7/2022	, if other than the
Effective date <u>if applicable</u> :	3/17/.	2022 days after amendment file date)	
Note: If the date inserted in this document's effective date on the		ble statutory filing requirements	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were a action was not required.	lopted by the incorporators, or bo	ard of directors without shareho	lder action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The n sufficient for approval.	number of votes cast for the ame	ndment(s)
☐ The amendment(s) was/were a must be separately provided f	oproved by the shareholders throu for each voting group entitled to vo	gh voting groups. The following te separately on the amendment	g statement !(s):
"The number of votes ca	st for the amendment(s) was/were	sufficient for approval	
by	(voting group)		
	(voung group)		
Dated	3/17/22	<u></u>	
-	A Jan 11	111	
selec	director, president or other officered, by an incorporator – if in the inted fiduciary by that fiduciary)		
	(Typed or printed na	a Lanuu J	
	(Title of person sign	President	