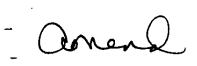
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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#### **COVER LETTER**

Division of Corporations NAME OF CORPORATION: GREAT STUNE FLOOR CASE DOCUMENT NUMBER: P12000 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ACQUELINE GREAT STONE FLOORCHIE Firm/ Company KINET DRIVE For further information concerning this matter, please call: at ( 561 ) 723 - 7106

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fce & □\$43.75 Filing Fee & □\$52.50 Filing Fee

Certified Copy

enclosed)

(Additional copy is

### **Mailing Address**

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Certificate of Status

### Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

## **Articles of Amendment** to

FILED

Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State) P120000 867 87 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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:

<del></del>	(Florida street address)	<del></del>
New Registered Office Address:	<u> </u>	, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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)

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:	e, ana sa	ny Smun, Sv as an Aga.
Example: X Change	<u>PT</u>	John Doc
X Remove	<u>V</u>	Mike Jones
_X Add	<u>sv</u>	Sally Smith
Type of Action (Check One)	<u>Title</u>	Name Address
1) Change		WALTER CZERNIAW SKI 3101 NE 21ST ST
X_ Add		FT. LAUDERDALE, FL. 33305
Remove		•
2) Change		<del></del>
Add		
Remove		<u></u>
3) Change		<u> </u>
Add		
Remove		
4) Change	<del></del>	
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		·

Attach additional sheets, if necessary).	(Be specific)				
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provisions for implementing the am	endment if not c	ontained in t	he amendment	itself:	
provisions for implementing the ain				<del></del>	
(if not applicable, indicate N/A)					
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(if not applicable, indicate N/A)					

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated OCT . 16 2012
Signature
(By a director, president of other officer —) differences or officers have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Jacqueline Ferreira (Typed or printed name of person signing)
(Typed br printed name of person signing)
President
(Title of person signing)