## P13000019949

(Re	questor's Name)		
(Address)			
(Address)			
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Na	me)	
(Do	cument Number)	)	
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On

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	<sub>ation:</sub> Builder ar	nd Stone Inc.		
DOCUMENT NUMB	er: p130000199	949		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		
Please return all corres	pondence concerning this ma	atter to the following:		
	Adam Zavodny	/		
·		Name of Contact Person	n	
		Firm/ Company		
	3 HArbor Woo	ds Cir.		
•	·	Address		
	Safety Harbor,	FI 34695		
•		City/ State and Zip Cod	e	
aza	avodny@hotma	ail.com		
<del></del>	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, please	se call:		
Adam Zavo	dny	<sub>at (</sub> 727	420-0272 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street	Address	
Ame	ndment Section	Amend	lment Section	
	sion of Corporations		on of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building		
i ananassee, PL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Builder and Stone Inc.			·	
(Name of Corporation as currently fl	iled with the Florida Dept.	of State)		
p13000019949				
(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statut <del>e</del> s, this <i>Florida Prof</i>	It Corporation adopts the follo	wing amer	ndment(s) to
A. If amending name, enter the new name of the co	orporation:			
			The	
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	," "Inc," or "Co". A pro			
B. Enter new principal office address, if applicable	<b>.</b>	, , , , , , , , , , , , , , , , , , ,		
(Principal office address MUST BE A STREET ADI	DRESS)		: <u> </u>	
		3	— <del>20</del>	77
	<del></del>	· · · · · · · · · · · · · · · · · · ·	α,	
C. Enter new mailing address, if applicable:				Ö
(Mailing address MAY BE A POST OFFICE BO	<u></u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	<del></del>	\$a.	<u> </u>	<b>'</b>
		••		
D. If amending the registered agent and/or register new registered agent and/or the new registered		da, enter the name of the		
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:		. Florida		
to the state of th	(City)	(Zip Code	<del>,                                    </del>	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		ept the obligations of the positi	ion.	
Signature of Ne	ew Registered Agent, if char	nging		

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	PI	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	p	Adam Zavodny	3 HArbor Woods Cir.
X Add			Safety Habor, FI 34695
Remove			
2) Change	<del></del>		
Add			
Remove			***************************************
3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	******		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)					
			_		<del> </del>
		· · · · · · · · · · · · · · · · · · ·			
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		· · · · · · · · · · · · · · · · · · ·			
F. If an amendment po provisions for imp (if not applicat	rovides for an exch lementing the amer le, indicate N/A)	ange, reclassifica ndment if not con	ition, or cancellat itained in the am	ion of issued share endment itself:	<u>S.</u>
·					
	···	······	•	<del></del>	
				<del>7. j. j.</del>	
	<del></del>			····	<del>~</del>
·	<del></del>		<del>~~</del>		

The date of each amendment(s) ad	loption:
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were sufficiently.	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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)
	(voling group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated 3/9/20	013
selected	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Adam Zavodny
	(Typed or printed name of person signing)
	President
•	(Title of person signing)