(Re	questor's Name)	
,	•	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
(00)	cament Number)	
Certified Copies	Certificates	s of Status
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MAR 24 2020

S. YOUNG

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: A N D STONE 1 C	CORP		<del> </del>		
DOCUMENT NUM	BER: P1500046240					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following	:			
	ROGER CASTILLO					
		Name of Contact	Person	·		
	A N D STONE I CORP					
	Firm/ Company					
	20210 FRANJO RD					
		Address				
	CUTLER BAY FL 33189					
		City/ State and Z	ip Code			
	INFO@YML-ACCOUNTING.COM					
	E-mail address: (to be us	ed for future annual	report n	otification)		
For further information	on concerning this matter, pleas			606.4108		
	at (	son Code	) 606-4108 2 & Daytime Telephone Number			
	of Contact Person or the following amount made:			•		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing F Certified Copy (Additional copy enclosed)	ee &	S52.50 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 tent Section of Corporations tree of Tallahassee Monroe Street, Suite 810 see, FL 32303		

## Articles of Amendment to Articles of Incorporation of

A N D STONE 1 CORP		
(Name of Corporation as current	tly filed with the Florida Dept. of State)	
P1500046240		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s 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 <u>MUST BE A STREET ADDRESS</u> )	202	
	222	
C. Enter new mailing address, if applicable:	Sec o	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
	ر قائم المائم	
	· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		
	<u></u>	
Name of New Registered Agent		
(Florida st	treet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen	it:	
I hereby accept the appointment as registered agent. I am familiar		

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	PT	John Do	<u>)e</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>with</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	T	_	ANGEL LUIS GARCIA	15410 SW 143 AVE
X Add				MIAMI FL 33177
Remove				
2) Change				
Add				
Remove 3 ) Change				
Add				
Remove				
4) Change		_		-
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				_

Attach additional sheets, if necessary).	rticles, enter change(s) here: . (Be specific)
	<del></del>
<del>,</del>	
<del> · · · · · · · · · · · · · · · · · · </del>	
	9-11-11-11-11-11-11-11-11-11-11-11-11-11
	· · · · ·
f an amendment provides for an ex-	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	···

	MARCH 4 2020	
	ption:	, if other than the
date this document was signed.	014.04.0000	
MARG Effective date if applicable:	CH 04 2020	
	(no more than 90 days	after amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep		statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board	of directors without shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suff		ber of votes cast for the amendment(s)
The amendment(s) was/were appromust be separately provided for ea		voting groups. The following statement eparately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were suff	ficient for approval
by		."
	(voting group)	
Dated 3/4/	2020	
Signature	<u> </u>	
		directors or officers have not been
	by an incorporator – if in the hand I fiduciary by that fiduciary)	ls of a receiver, trustee, or other court
R	OGER CASTILLO	
_	(Typed or printed name	of person signing)
Р	RESIDENT	

(Title of person signing)