## P15000071754

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RIO STONE GRO	UP INC			
DOCUMENT NUME	BER:				
The enclosed Articles	of Amendment and fee are sul	omitted for filing.			
Please return all corres	pondence concerning this mat	tter to the following:			
	LISETTE CRESPO				
	Name of Contact Person				
	CPA SOLUTIONS INC				
	Firm/ Company				
	4037 AVALON PARK E BL	VD STE 2			
	Address				
	ORLANDO, FL 32828				
	City/ State and Zip Code				
	F-mail address: (to be us	ed for future annual report	notification)		
	is man address, (to be as	ed for future annual report	TO THE CONTRACT OF THE CONTRAC		
For further information	n concerning this matter, pleas	se call:			
LISETTE CRESPO		at (	650-9088		
Name o	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ortment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee 1. Monroe Street, Suite 810 ssee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

RIO STONE GROUP INC		
(Name of Corporation	as currently filed with the Florida Dept. of State)	
P15000071754		
(Docum	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the following	owing amendment(s) t
A. If amending name, enter the new name of the co	poration:	
		The new
name must be distinguishable and contain the word "co." Inc.," or Co.," or the designation "Corp." "Inc.," "chartered." "professional association," or the abbrev	or "Co". A professional corporation name must co	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	<u>ESS</u> )	
		202
C. Enter new mailing address, if applicable:	7-7- 1-8-	
(Mailing address MAY BE A POST OFFICE BO)		- <del>2</del>
	<u> </u>	. <del></del> .
	· 	T T
	<u></u>	<del></del>
D. If amending the registered agent and/or register new registered agent and/or the new registered of		. 6
Name of New Registered Agent		
	(Florida street address)	
New_Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi	tored Agent	
I hereby accept the appointment as registered agent.	im familiar with and accept the obligations of the posit	ion.
Signa	re 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.

PT. X Change John Doe X Remove <u>V</u> Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Address <u>Name</u> (Check One) D IBRAIM BITTAR NETO 3255 NE 184 STREET #12102 1) \_\_\_\_ Change AVENTURA, FL 33160 \_ Add Remove 2) \_\_\_\_ Change  $\_$  Add \_ Remove \_ Change \_ Add Remove 4) \_\_\_\_ Change \_\_\_ Add \_\_ Remove 5) \_\_\_\_ Change Add Remove 6) \_\_\_\_ Change Add Remove

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
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If an amendment provides for an exc	ange, reclassification, or can-	cellation of issued shares,
provisions for implementing the am (if not applicable, indicate N/A)	nument ii not contameu in tii	e amendment usen.
,		
	<del></del>	

The date of each amendment(	s) adoption:	, if other than the
date this document was signed.  Effective date if applicable:	12/31/2017	
	(no more than 90 days after amendment file	e date)
	is block does not meet the applicable statutory filing require Department of State's records.	rements, 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.	adopted by the incorporators, or board of directors without s	shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wei	adopted by the shareholders. The number of votes cast for the sufficient for approval.	he amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
	tyoting group)	
sel	a director, president or other officer – if directors or officers ected, by an incorporator – if in the hands of a receiver, truste pointed fiduciary by that fiduciary)	have not been ee, or other court
	LEONARDO ROSA CIPRIANO	
	(Typed or printed name of person signing)	· · · · ·
	PRESIDENT	
	(Title of person signing)	