## PIG6663333

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Granite Manage	d Growth Inc.
DOCUMENT NUMBER: P16000096333	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	natter to the following:
Donna Colavito	
Granite Associates, LP	Name of Contact Person
<del></del>	Firm/ Company
225 Banyan Boulevard, St	nite 130
Naples, FL 34102	Address
<del></del>	City/ State and Zip Code
dcolavito@granitelp.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Donna Colavito	at (239 228-6500
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	  e payable to the Florida Department of State: 
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Granite Managed Growth Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P16000096333 (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: Granite Associates, Inc. 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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 (Florida street address) New Registered Office Address: , Florida (Zip Code) (City) 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. Signature of New Registered Agent, if changing

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address of each Officer a (Attach additional sheets, Please note the officer/din P = President; V = Vice of Executive Officer; CFO = held. President, Treasure, Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove,	and/or D if necess rector titl President = Chief I r, Directo in the fo ves the c	pirector being sary)  The by the first leads of the first leads of the first leads of the first leads of the	ter of the office title:  ; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief  ir. If an officer/director holds more than one title, list the first letter of each office  D.  Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is  ly Smith is named the V and S. These should be noted as John Doe, PT as a Change.
Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Nan</u>	<u>Addres</u> s
1) Change		N//	<del></del>
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E. If amending or adding additional Article. (Attach additional sheets, if necessary). (3)	s, enter change(s) nere: Be specific)
N/A	
197A	
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F. If an amendment provides for an exchan	ge, reclassification, or cancellation of issued shares,
provisions for implementing the amenda	ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
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. , .	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of S	t meet the applicable statutory filing requirements, this date will not be listed as the tate's records.
Adoption of Amendment(s) (CHE	CK ONE)
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for ap	nareholders. The number of votes cast for the amendment(s) proval.
	shareholders through voting groups. The following statement troup entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	ment(s) was/were sufficient for approval
by	ig group)
1000	ig group)
The amendment(s) was/were adopted by the baction was not required.	oard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the ir action was not required.	corporators without shareholder action and shareholder
September 14, 2017 Dated	
Signature	2. 0.37
	lent or other officer – if directors or officers have not been
	porator – if in the hands of a receiver, trustee, or other court
appointed fiduciary	by that fiduciary)
Keith Suehn	holz 
(†	yped or printed name of person signing)
Director	
	(Title of person signing)