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Division of Corporations
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From:

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Account Number : 120150000034
Phone : (239)344-7417
Fax Number : (888)344-7262

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COR AMND/RESTATE/CORRECT OR O/D RESIGN STYLE CRAFT COUNTERTOP INC

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TO: Amendment Section

(((H20000382114 3)))

COVERLETTER

Division of Corporations			
NAME OF CORPORATION:	STYLE CRAI	FT COUNTERTOP INC	
DOCUMENT NUMBER:	P17000084794		
The enclosed Articles of Amendm	ent and fee are sub	omitted for filing.	
Please return all correspondence of	oncerning this mat	ter to the following:	
		ISMAEL CARDOSC)
	****	Name of Contact Pers	on
	т	IMELINE BUSINESS C	
		Firm/ Company	
	897	I DANIELS CENTER D	RIVE 304
		Address	
		FORT MYERS, FL 33	8912
		City/ State and Zip Co	de
	\ca	lacegonzagaxavier@jgma	ui.com
i ma:		ed for future annual repo	
5 1141	. 1111		
For further information concerning	g this matter, pleas	se call:	
ISMAEL CARDOSO		at (239	344-7417 Ode & Daytime Telephone Number
Name of Contact I	² erson	Area (Ode & Daytime Telephone Number
Enclosed is a check for the follow	ring amount made	payable to the Florida De	epartment of State:
~	1.75 Filing Fee & tificale of Status	Cl\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, Ft. 32303	

(((H200003821143)))

Articles of Amendment to Articles of Incorporation of

	of	
ST	YLE CRAFT COUNTERTOP INC	
(Name of Corpor	ration as currently filed with the Florida Dept. of State)	
	P17000084794	
(fx)	ocument Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Flo its Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amen	dment(s) to
A. If amending name, enter the new name of the	te corporation:	
		ngse
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp." "It "chartered," "professional association," or the ab	f "corporation." "company," or "incorporated" or the abbreviation "Corloc," or "Co". A professional corporation name must contain the value violation " $P_{\rm e}$ t."	rp" vord
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		
C. Enter new mailing address, if applicable:	nov.	
(Mailing address MAY BE A POST OFFICE)	<u>BUX</u>)	_
D. If amending the registered agent and/or regis	istered office address in Florida, enter the name of the	
new registered agent and/or the new register	red office address:	<u> </u>
Name of New Registered Agent		· · · · · · · · · · · · · · · · · · ·
	SS 1	-
	(Florido sircet address)	
New Registered Office Address:		M
Sea Register Opice Adaress.	TCia) , Florida , Co	
		1
	<u> </u>	
New Registered Agent's Signature, if changing I I hereby accept the appointment as revistered agen	Registered Agent: n. I am familiar with and accept the obligations of the position.	
	and the second second in congularity of the position,	
		
\mathcal{S}_{i}	ignature 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.

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	(Attach additi	or adding additional ional sheets, if necessor	ny). (Be specific)	- 		
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(if not applicable, indicate X A)	provisions f	or implementing the	amendment if not co	ontained in the am	endment itself;	ב
	(if not a	pplicable, indicate N_{z}	1)			
		····				
	·					
						
						
						
						

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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 Einancial Officer, If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTO.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	Ŋ	TULIO CESAR SOARES SILVA	2721 COLONIAL BLVD APT 20
X Add			FORT MYERS, FL 33907
Remove			
2) Change			
Add			
Remove 3) Change			
Add			MAR 9-40-1
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change	-		
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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The date of each amendment	adoption: if other than the
has this document was signed	
ffortise date if applicable:	to some enon the days after amendment tile datet
Note: If the date inserted in t	s block does not most the applicable statutory filing requirements, this date will not be listed as if Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
I the amendment(s) was were action was not regulied.	adopted by the incorporators, or hourd of directors without shareholder uction and shareholder
L. The amendment(3) was weren't by the shareholders was/w	adopted by the shareholders. The number of votes east for the imendment(s) as setficient for approval
	approved by the shareholders through voting groups. The following statement for each voting group omitted to vote separately on the amendment/s:
"The number of votes	est for the amendment(s) was were sufficient for approval
i)	realing group)
Dated	11 - 3 - 2020 a director, president or other officer - if directors or officers have not been
الم	a director, president or other officer— if directors or officers have not been reted, by an incorporator—if in the hands of a receiver, trustee, or other court cointed fiductory by that fiductory)
f	WALACE GONZAGA XAVIER
	(Types or proused name of person signing)
	ARGIPENT of the of person signings
	of the of person signings