## P19 000033411

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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: CAID & GRANIT	E INC	
DOCUMENT NUMB			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JONATHAN ACOSTA		
-		Name of Contact Person	1
-		Firm/ Company	
	570-16TH ST SE		
-	_	Address	
	NAPLES, FL 34117		
		City/ State and Zip Code	3
	JONATHANA641@GMAIL	.COM	
-	E-mail address: (to be us	sed for future annual report	notification)
5 O V 1 . O		U-	
r or further information	concerning this matter, pleas	se can:	
JONATHAN ACOSTA		at (	
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortment 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CAID & GRANITE INC		
(Name of Corporation as currently fi	led with the Florida Dept. of State)	·
P19000033411		
(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following	ng 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," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviati rofessional corporation name must conta	on "Corp.," in the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable:		2020 :
(Mailing address MAY BE A POST OFFICE BOX)		1
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	3: 00
Name of New Registered Agent		_
(Florida street	address)	_
New Registered Office Address:	, Florida	
(C)		Coder
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	a and accept the obligations of the position.	
Signature of New Regi	stered 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)

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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	JAVIER PADILLA	570 16TH ST SE
Add			NAPLES, FL 34117
X Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

	ESIDENT	(Be specific)			
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The date of each amendment(s) adoption: _date this document was signed.	, if other than the
Effective date if applicable:	<u>,                                     </u>
Harris and Harrison	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be listed as the of State's records.
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was/were adopted by the action was not required.	ne incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	ne shareholders. The number of votes east for the amendment(s) or approval.
	the shareholders through voting groups. The following statement ag group entitled to vote separately on the amendment(s):
"The number of votes cast for the an	nendment(s) was/were sufficient for approval
by	
(v	oting group)
09/02/2020	
Dated	<del>&gt;</del>
(By a/director, pr selected, by an ir	esident or other officer – if directors or officers have not been beorporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
JONATE	IAN ACOSTA
<del></del>	(Typed or printed name of person signing)
PRESIDI	INT
<del></del>	(Title of person signing)