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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: stoneswood elite in	10	
DOCUMENT NUM	5100000/00###		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	itter to the following:	
	PATRICIA JUDISH		
		Name of Contact Person	1
		Firm/ Company	
	3698 SW STERRICKER ST		
		Address	
	PORT ST LUCIE, FL 34953		
		City/ State and Zip Code	2
	ALE.0213@YAHOO.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
PATRICIA JUDISI	-1	at (<u>760</u>	8876848
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 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)
_	ailing Address		Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently fil	ed with the Florida Dept. of State)	
P19000068252		
(Document Number of Co	rporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida Profit Corporation adopts the following amendmen	nt(s) i
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation," "comp", "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pr", "chartered," "professional association," or the abbreviation "P.A."		
P. Untownous principal office address if applicables	207	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	✓	3
-	<u> </u>	1 - 1
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	P	<u>"}</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ب ب	3
	ب ت	
	<u> </u>	
-	······································	
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 a	ddress)	
New Registered Office Address:	. Florida	
New Registered Office Address. (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 Regis	ered 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 = Chie 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PT	PATRICIA JUDISH	3698 SW STERRICKER ST
X Add			PORT ST LUCIE
Remove			34953
2) X Change	V	RENATO PIEDRAS	3698 SW STERRICKER ST
Add		-	PORT ST LUCIE
Remove 3) Change			34953
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			1989
Remove			
6) Change			
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Attach addi	g or adding additional A itional sheets, if necessary). (Be specific)	<u></u>		
provisions for implementing the amendment if not contained in the amendment itself:						
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provisions for implementing the amendment if not contained in the amendment itself:	f an amen	dment provides for an ex	change, reclassific	ation, or cancellat	tion of issued share	25,
(if not applicable, indicate N/A)	provisions	for implementing the ar	nendment if not co	ntained in the am	endment itself:	-
	(if not	applicable, indicate N/A)				
	· ··-					
						
						

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09/14/2021	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
9/14/2021	
Effective date if applicable:	
(no more than 90 days after amendment file da	nte)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shar action was not required.	eholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follo must be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
09/14/2021 Dated	
(By a director, president or other officer – if director, deflicers has	ve not been
selected, by an incorporator – if in the hands of a receiver, trustee, or	
appointed fiduciary by that fiduciary)	
PATRICIA JUDISH!	RENATIO PLETICAS.
(Typed or printed name of person signing)	
PRESIDENT. (Title of person signing)	VICE PRESIDENT
(Title of person signing)	

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