P19000087804

| (Re | equestor's Name) | |
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| (Ac | idress) | |
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| (Cil | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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R. WHATE:

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: REMOVATION Granite Design Co | C^{\prime} |
|---|--------------|
| DOCUMENT NUMBER: Y 19 0000 87 804 | |
| The enclosed Articles of Amendment and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Yankier Selles | |
| Name of Contact Person | |
| Firm/ Company | |
| 3000 Buckley Ave | |
| Lake Worth FC 33461 City/ State and Zip Code | |
| E-mail address: (to be used for future annual report notification) | |
| for further information concerning this matter, please call: | |
| On Kier Silles Name of Contact Person at (S(0)) 379-6238. Area Code & Daytime Telephone Number | _ |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | |
| \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$35 Filing Fee Certificate of Status \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) | |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, Fl. 323142415 N. Monroe Street, Suite 810 | |

Tallahassee, FL 32303



March 14, 2020

YANKIER SELLES 3006 BUCKLEY AVE LAKE WORTH, FL 33461

SUBJECT: RENOVATION GRANITE DESIGN CORP.

Ref. Number: P19000087804

We have received your document for RENOVATION GRANITE DESIGN CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 420A00005685

www.sunbiz.org

Articles of Amendment

to

| | Articles of Inco | rporation | |
|-----------------|------------------|-----------|----------|
|) renovation | Granite | Design | COLD: 52 |
| | | | |

(Document Number of Corporation (if known)

nt(s) to

| | | The new |
|--|---|-----------|
| name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre | " or "Co". A professional corp | |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD | | |
| C. Enter new mailing address, if applicable: | | |
| (Mailing address <u>MAY BE A POST OFFICE BO</u> | <u></u> | |
| | | |
| new registered agent and/or the new registered | office address: | |
| | | |
| new registered agent and/or the new registered | office address: | |
| new registered agent and/or the new registered | office address: (Florida street address) | . Florida |
| new registered agent and/or the new registered Name of New Registered Agent | office address: | |
| new registered agent and/or the new registered Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Reg | office address: (Florida street address) (City) | Florida |
| Name of New Registered Agent | office address: (Florida street address) (City) | Florida |
| new registered agent and/or the new registered Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Reg | office address: (Florida street address) (City) | Florida |

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.

| Example: X Change | PT Je | ohn Doe | | |
|----------------------------|-----------------------|-------------|-------------------|-------------|
| X Remove | <u>V</u> <u>&</u> | like Jones | | |
| _ <u>X</u> Add | | ally Smith | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s | |
| 1) Change | Υ | Mabelin Dia | 12 3006 Buckley a | w |
| Add | | | Lake Worth, FC 3 | <u>34</u> 6 |
| X_ Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove 3) Change | | | | <u></u> |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | · · · · · · |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| 1,, | ould like to add an em | sail addans le |
|--------------------------|---|------------------|
| | JOIL "NO GOLD UN CA | rain accused to |
| W/ Co | mpany please the one is next larger in sen | that 12 1121 |
| there | is next larger in sen | 1100 |
| my | how email is: | |
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| an amendmen! | provides for an exchange, reclassification, or cancellation o | f issued shares. |
| <u>provisions for in</u> | nplementing the amendment if not contained in the amendmable, indicate N/A) | |
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E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

| The date of each amendment(s) adoption: 03: 1.9 2020. 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 meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records. | vill 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 shareholder action a action was not required. | ind shareholder |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes east for the amendment(s) was/were sufficient for approval | |
| by" (voting group) | |
| Signature Signature (By a director, president or other officer – if directors or officers have not been | |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| (Typed or printed name of person signing) | |
| President. | |
| (Title of person signing) | |