P22000014625

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TARETARY OF STATE

A. BUTLER AUG 1 5 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: ANYSTONE INC		
	MBER: P22000014625		
	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	atter to the following:	
	DRAGOS LETCAE		
	·	Name of Contact Person	n
	ANYSTONE INC		
	·	Firm/ Company	
	2209 HOPE ST		
		Address	
	HOLLYWOOD, FL 33020		
		City/ State and Zip Cod	e
	Anystone.inc@gmail.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further informa	tion concerning this matter, plea	se call:	
DRAGOS LETCA	E	954 at (882-0354
Nar	ne 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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
7 1 1	Mailing Address Amendment Section Division of Corporations C.O. Box 6327 Callahassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

ANYSTONE INC.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(ivaine o	f Corporation as current	ly filed with the Florida D	ept VACSHAY 31 A	IM ~ .
22000014625			SFORETS =	M 7: 11
	(Document Number o	f Corporation (if known)	TALLAHASSE	STATE
rsuant to the provisions of section 607. Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation	adopts the following	g amendment(s
If amending name, enter the new na	me of the corporation:			
/A				_The new
me must be distinguishable and contain nc.," or Co.," or the designation "C hartered," "professional association,"	orp," "Inc," or "Co"	A professional corporation		
Enter new principal office address, i	f applicable:	N/A		
rincipal office address <u>MUST BE A ST</u>				
				
Enter new mailing address, if appli		N/A		
(Mailing address MAY BE A POST C	OFFICE BOX)			.
				
If amending the registered agent an	d/or registered office add	ress in Florida, enter the (name of the	
new registered agent and/or the new				
Name of New Registered Agent	N/A			-
				_
	(Florida sv	reet address)		
	NICA			
New Registered Office Address:	N/A 	(City)	, Florida	

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	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	PS		Valentin Ardeleanu	441 SE 3rd St
X Add				Арт 108
Remove				Dania, FL 33004
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. <u>If an</u> Atta	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
. If an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A	(I) not appricable, matcale 1878)

date this document was signed.	
0.17	/27/2022
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this ocument's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad- action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were ad by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
must be separately provided fo	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): st for the amendment(s) was/were sufficient for approval
ht'	· ·
by	(voting group)
by 04/27/202	
•	
04/27/202 Dated	
04/27/202 Dated Signature (By a select	
04/27/202 Dated Signature (By a select	director, president or other officer – if directors or officers have not been led, by an incorporator – if in the hands of a receiver, trustee, or other count
04/27/202 Dated Signature (By a select	director, president or other officer – if directors or officers have not been led, by an incorporator – if in the hands of a receiver, trustee, or other countried fiduciary by that fiduciary)
04/27/202 Dated Signature (By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other countried fiduciary by that fiduciary) DRAGOS LETCAE

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