P08000050053

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Amend Ma ceps/08

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: WILSON P	AINTING & FAUX FINISHES INC	<u> </u>
DOCUMENT NUMBER: P08000056653		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning the	his matter to the following:	
LUIS	SWILSON	
(Name	e of Contact Person)	
(F	Firm/ Company)	
9061 RI	DGELAND DR	
	(Address)	
	R BAY FL 33157	
For further information concerning this matter	State and Zip Code) r, please call:	
LUIS WILSON	at (<u>305</u>) <u>308-8411</u>	
(Name of Contact Person)	(Area Code & Daytime Tele	ephone Number)
Enclosed is a check for the following amount:		
✓ \$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 18, 2008

LUIS WILSON 9061 RIDGELAND DR CUTLER BAY, FL 33157

SUBJECT: WILSON PAINTING & FAUX FINISHES INC

Ref. Number: P08000056653

We have received your document for WILSON PAINTING & FAUX FINISHES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Photo copies are not acceptable.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 508A00037135

Please let me know
when enclosed document
has been filed.
THANKS
THANKS
PH # 305 308 8411

RECEIVED AN 8: 00 SOUB JUN 26 AN 8: 00 SECRETARY OF STATE A TALLAHASSEE. FLORIDA TALLAHASSEE. FLORIDA

Articles of Amendment Articles of Incorporation of

WILSON PAINTING & FAUX FINISHES INC
(Name of corporation as currently filed with the Florida Dept. of State)
P08000056653
(Document number of corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> dopts the following amendment(s) to its Articles of Incorporation:
EW CORPORATE NAME (if changing):
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
MENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) ad/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ADDITION: MANUEL GIANCARLO GUZMAN (SECRETARY)
855 NW 44 AVE
MIAMI FL 33126
(Attach additional pages if necessary)
an amendment provides for exchange, reclassification, or cancellation of issued shares, provision r implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N

(continued)

The date of each amendment(s) adoption: 06/13/2008
Effective date if <u>applicable</u> : 06/13/2008
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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 cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
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)
Maria Soledon Wilson (Typed or printed name of person signing)
President (Title of parson cigning)
(Title of person cigning)

FILING FEE: \$35