## Phom56199

| (Re                     | questor's Name)    | _           |  |  |
|-------------------------|--------------------|-------------|--|--|
| (Ad                     | ldress)            |             |  |  |
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| (Cit                    | ty/State/Zip/Phone | e #)        |  |  |
| PICK-UP                 | ☐ WAIT             | MAIL        |  |  |
| (Ві                     | ısiness Entity Nar | me)         |  |  |
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| Special Instructions to | Filing Officer:    |             |  |  |
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R. WHITE

16 AUC -8 AM II: 39

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORAT              | ION:A  | RTISAN SEAL I                                      | NC<br>                                |  |  |
|-------------------------------|--|--|---------------------------------------|--|--|
| DOCUMENT NUMBER               | t:P11000056799   |  |                                       |  |  |
| The enclosed Articles of A    | Imendment and fee are su   | bmitted for filing.                                |                                       |  |  |
| Please return all correspor   | idence concerning this ma  | tter to the following                              | ng:                                   |  |  |
|                               |  | ROGER RO   | JAS                                   |  |  |
| _                             |  | Name of Cont                                       | act Person                            |  |  |
|                               |  | Firm/ Cor  | пралу                                 |  |  |
|                               |  | 2310 NE 33RD T                                     | TERRACE                               | <u> </u>   |  |
|                               | Address  |  |                                       |  |  |
|                               |  | CAPE CORAL,  |                                       |  |  |
| , .                           |  | City/ State and                                    | l Zip Code                            |  |  |
|                               |  | ISANSEAL@HC  |                                       |  |  |
|                               | E-mail address: (to be us  | sed for future annu                                | ual report                            | notification)  |  |
| For further information co    | ncerning this matter, pleas  | se call:   |                                       |  |  |
| ROGE                          | ER ROJAS   | at (   | 239                                   | <del>745-0972</del>  |  |
| Name of C                     | Contact Person   |  | Area Coo                              | de & Daytime Telephone Number  |  |
| Enclosed is a check for the   | e following amount made  | payable to the Flo                                 | rida Depa                             | rtment of State:   |  |
| \$35 Filing Fee               | □\$43.75 Filing Fee & Certificate of Status                            | S43.75 Filing Certified Cop (Additional cenclosed) | ру                                    | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |
| Amendr<br>Division<br>P.O. Bo | Address<br>ment Section<br>of Corporations<br>x 6327<br>ssee, FL 32314 |  | Amend<br>Divisio<br>Clifton<br>2661 E | Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301  |  |

## **Articles of Amendment** to Articles of Incorporation



16 AUG -8 AHII: 39



## ARTISAN SEAL, INC

(Name of Corporation as currently filed with the Florida Dept. of State) P11000056799 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 address) New Registered Office Address: , Florida

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 Registered Agent, if changing

(City)

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 Doe         |                      |
|-------------------------------|--------------|------------------|----------------------|
| X Remove                      | <u>V</u>     | Mike Jones       |                      |
| X Add                         | <u>sv</u>    | Sally Smith      |                      |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>      | <u>Addres</u> s      |
| 1) Change                     | С            | ALEXANDER PAULEC | 2310 NE 33RD TERRACE |
| X Add                         |              |                  | CAPE CORAL, FL 33909 |
| Remove                        |              |                  |                      |
| 2) Change                     | c            | CEDRI ORTUETA    | 2310 NE 33RD TERRACE |
| X Add                         |              |                  | CAPE CORAL, FL 33909 |
| Remove                        |              | •                |                      |
| 3 ) Change                    |              |                  |                      |
| Add                           |              |                  |                      |
| Remove                        |              |                  |                      |
| 4) Change                     |              |                  |                      |
| Add                           |              |                  |                      |
| Remove                        |              |                  |                      |
| 5) Change                     |              |                  |                      |
| Add                           |              |                  |                      |
| Remove                        |              |                  | ····                 |
| 6) Change                     | <u></u>      |                  |                      |
| Add                           |              |                  |                      |
| Remove                        |              |                  |                      |

| If amending or adding additional Arti<br>Attach additional sheets, if necessary). | (Be specific)  |
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| f an amendment provides for an excl   | nange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A)   | ndment if not contained in the amendment itself:           |
|   |  |
|   | •  |
|   | •  |
|   | •  |
|   | •  |
|   |  |
|   |  |

| The date of each amendment(s) addate this document was signed.           | loption:  | , if other than the       |
|--|---|---------------------------|
| Effective date if applicable:  |   |                           |
|  | (no more than 90 days after amendment file date)  |                           |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filing requirements, this date very partment of State's records.  | vill not be listed as the |
| Adoption of Amendment(s)   | (CHECK ONE)   |                           |
| ☐ The amendment(s) was/were ado<br>by the shareholders was/were su       | pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.  |                           |
|  | roved by the shareholders through voting groups. The following statement 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 ado action was not required.                   | pted by the board of directors without shareholder action and shareholder   |                           |
| ☐ The amendment(s) was/were add action was not required.                 | pted by the incorporators without shareholder action and shareholder  |                           |
| Dated  | 08/01/2016  |                           |
| Signature  | Player Rojes  |                           |
| (By a d  | rector, president or other officer—)if directors or officers have not been 1, by an incorporator – if in the hands of a receiver, trustee, or other court |                           |
|  | ed fiduciary by that fiduciary)   |                           |
|  | ROGER ROJAS   |                           |
|  | (Typed or printed name of person signing)   |                           |
|  | PRESIDENT   |                           |
|  | (Title of person signing)   |                           |