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Division of Corporations

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From:

Account Name

: FLORIDA TAXES Account Number : 120120000044

Fax Number

: (786)587-7927 : (954)360-7979

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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PAGE 02/05

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Articles of Amendment to Articles of Incorporation

of

FILED SECRETARY OF STATE DIVISIONAL CORPORATIONS

16 FEB 16 AM 8: 49

(Name of Corporation	as currently filed with the	Florida Dept. of State)
P15000035537		•
(Document)	nt Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida S	Statutes, this <i>Florida Profit C</i>	Corporation adopts the following amendment(
4. If amending name, enter the new name of the corp	poration:	
IBB PAINTING CORP		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the al	"Inc," or "Co". A profess	or "incorporated" or the abbreviation ional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	
·		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, ffice address:	enter the name of the
•		
Traine of treer toggette an region		
	(Florida street address)	
New Registered Office Address:		. Florida
New Negistered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I descriptions of the comment of the	<u>tered Agent:</u> am familiar with and accept t	the obligations of the position.
•		

Example:

H160000 390303

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.

X Change	PI	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	8	KENNIO L. BARBOSA	9266 W ATLANTIC BLVD
Add			APT 1025
Remove			CORAL SPRINGS, FL 33071
2) Change		·	
Add		•	
Remove			
3) Change			
Add			
Remove			
4) Change			
, Add			
Remove			
5) Change		_	
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	•	02/15/20	* * *	MUSQES ETA NIVISION SE	CORPORATION	
The date of each		t(s) adoption:		16 FEB	6 AM 8: 49	in the
Effective date if	f applicable:	02/15/2016				
		(no	more than 90 days after amena	lment file date)		
		this block does not make Department of State	eet the applicable statutory filire's records.	ng requirements, this de	ate will not be listed a	is the
Adoption of An	nendment(s)	(CHECK	CONE			
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by		(voting g	<u>.</u>	.,,		
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The amendme		re adopted by the board	d of directors without sharehold	er action and sharehold	er	
The amendme		re adopted by the incor	porators without shareholder ac	tion and shareholder		
	02/15 Dated	/2016				
·	<u></u>	Burka	res		<i>,</i> 	
	s		or other officer – if directors or ator – if in the hands of a receive that fiduciary)			
		PRESIDENT				
		(Type	ed or printed name of person sign	ning)		
		LUCIANA E SO	ARES			
•			(Title of person signing)			