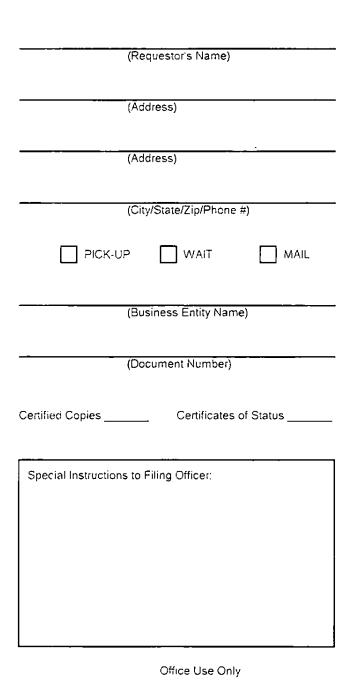
P23000048063





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S. ROBERTS

AUG 1 5 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: POLUX PAINTING	G INC	
	BER: P23000048063		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JOSE VARELA		
		Name of Contact Persor	1
	11133 HANLON TERRACE	Firm/Company ALLEY	
		Address	
	WINTER GARDEN FL 3478	37	
		City/ State and Zip Code	
	dayglemy@poluxpainting.com	n	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
JOSE VARELA		at (<u>407</u>	8209990
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$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)
Am Div	illing Address lendment Section vision of Corporations 2. Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

			INTI		

(Name of Corporation as currently	filed with the Florida Dept. of State)
P23000048063	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
POLUX PAINTING & CONSTRUCTION INC	The new
name must be distinguishable and contain the word "corporation," "co "Inc" or Co.," or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(maining dualess MAT BE AT OST OTTICE DOX)	
	· · ·
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address:	, Florida
(0	Zity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	in and accept the obligations of the position.
0: 0: 0	
Signature of New Res	zistered Agent, if changing

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.

X_Change	PT	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1)Change			 	
Add				<u></u>
Remove				
2) Change	<u></u>			
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	heets, if necessary).	(Be specific)				
√/A						
· .						
					•	-
						
<u> </u>		 -	<u> </u>			
						
	<u> </u>					
					•	- "
. If an amendment p provisions for imp (if not applicate	provides for an exc plementing the am ble, indicate N/A)	endment if not	contained in th	cellation of issue e amendment its	<u>d shares,</u> self:	
i/A						
-						
		· · · · · · · · · · · · · · · · · · ·				
			· · ·			
					.	

	ion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file de	ate)
Note: If the date inserted in this block document's effective date on the Departr	does not meet the applicable statutory filing requiremment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the ent for approval.	amendment(s)
	d by the shareholders through voting groups. The follow voting group entitled to vote separately on the amenda	
"The number of votes cast for th	he amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected, by appointed fi	or, president or other officer – if directors or officers ha an incorporator – if in the hands of a receiver, trustee, duciary by that fiduciary) E VARELA (Typed or printed name of person signing)	eve not been or other court
OW	NER/ DIRECTOR	

(Title of person signing)