## P97000029931

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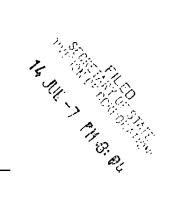
## **COVER LETTER**

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: FILIS PAINTING, INC.					
DOCUMENT NUMBER: P97000029931					
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
THOMAS FILIS	IR				
	Name of Contact Person	n			
FILIS PAINTING	INC				
	Firm/ Company				
6629 HARBOR D	PRIVE				
	Address				
HUDSON, FL 34					
	City/ State and Zip Cod	e			
KDSREALESTATE@	YAHOO.COM				
E-mail address: (to be us	sed for future annual report	notification)			
For further information concerning this matter, please	se call:				
THOMAS FILIS #R	at ( 727	, 862-4251			
Name 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:			
	_	_			
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy	□\$52.50 Filing Fee Certificate of Status			
Certificate of Status	(Additional copy is	Certified Copy			
	enclosed)	(Additional Copy			
		is enclosed)			
Mailing Address	Street	<u>Address</u>			
Amendment Section	Amendment Section				
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



FILIS PAINTING, IN	IC.
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(Name of Corporation as currently filed with the Florida Dept. of State)	_
P9700029931	
(Document Number of Corporation (if known)	<u></u>
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ving amendment(s) to
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 "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name mu 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)	<del></del>
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_
	<del>-</del> -
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 AT DERINED CREEK Filis	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	_
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 Begistered Agent, if changing	7.

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 (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	CREEK FILIS, KATHERINE	6629 HARBOR DRIVE
✓ Add			HUDSON, FL 34667
Remove			
2) Change	РТ	FILIS, THOMAS JR	6629 HARBOR DRIVE
Add			HUDSON, FL 34667
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<del></del>	
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	<del></del>
<del> </del>	
	· · · · · · · · · · · · · · · · · · ·
· .	<del> </del>
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
	<u> </u>

The date of each amendment(s) adoption: 06/27/2014	, if other than the
date this document was signed.	
Effective date if applicable:	. <u></u>
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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)	
(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.	
Dated_06/27/2014	
(By a director, president or other officer — 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)	
THOMAS FILIS JR	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	