I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under	
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears	
above, or on an attachment with all other like empowered.	

SIGNATURE: ILLARION MASLO

T

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P03000153240

Entity Name: MASLO PAINTING, INC.

Current Principal Place of Business:

23353 AVACADO AVE PORT CHARLOTTE, FL 33980

Current Mailing Address:

23353 AVACADO AVE PORT CHARLOTTE, FL 33980

FEI Number: 37-1480925

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MASLO, ILLARION 23353 AVACADO AVE PORT CHARLOTTE, FL 33980 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Officer/Director Detail :					
Title	P	Title	т		
Name	MASLO, ILLARION	Name	MASLO, MARIA		
Address	23353 AVACADO AVE	Address	23353 AVACADO AVE		
City-State-Zip:	PORT CHARLOTTE FL 33980	City-State-Zip:	PORT CHARLOTTE FL 33980		

01/18/2019

FILED Jan 18, 2019 Secretary of State 0227275768CC

Certificate of Status Desired: No

Date

PRESIDENT

Date