K92852

(Requestor's Name)			
(Ac	ddress)		
(Address)			
(Ci	ty/State/Zip/Phor	ne #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate	es of Status	
Special Instructions to Filing Officer:			
·			

Office Use Only



600280640246

01/12/16--01015--011 **25.00

02/08/18--01001--033 **10.00



FEB - 8 2016 C McNAIR

JAN 1 4 2016 C MCNAIR



RECEIVED

16 FEB -4 AM 10: 32

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 26, 2016

GLORIA CAIN EDWARD SERRA CPA PLLC 6118 W. CORPORATE OAKS DRIVE CRYSTAL RIVER, FL 34429

SUBJECT: FLORIDA STATE PAINTING INC.

Ref. Number: K92852

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The incorrect form was submitted. Please complete the attach Articles of Amendment for a Florida Profit Corporation.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 416A00001656

2/1/2016 - Corrected, Signed copy ATTacHed Thanks Gine Com

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: Floria	in State Pa	Inting INC
DOCUMENT NUMBER	R:	952	<u>'</u>
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.	
Please return all correspon	ndence concerning this mat	ter to the following:	
_	Gloric	Name of Contact Person	
	EUWARO Se	Firm/ Company	1 C
		Firm/ Company	
	6118 W. Co.	rporate Baks Address	DRIVE
	0	₹ Address	
Crystel River F1 - 34429 City/ State and Zip Code			
City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Gloria Co	lin	at (_352_	
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department 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)
B4 - 111	- A dal	Ctunat	A didwood

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

O LO VI CONSTRUCTIONS

Florion STATE PA	ainting INC.
(<u>Name of Corporation</u>	on as currently filed with the Florida Dept. of State)
K 928s	⁻ 2
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the designation or the designation of the designati	d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new	
Name of New Registered Agent	
Hume of New Registered rigem	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent:
	I am familiar with and accept the obligations of the position.
Signo	ature of New Registered Agent, if changing

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 <math>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> <u>John</u>	n <u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_ <i>D</i>	Paul W. Piatek	4414 E. Harvaro DA
💢 Add			Hermando, Fl - 34442
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ication, or can	icellation of is	ssued shares,	
-			

The date of each amendment(s) adoption: date this document was signed.	January	7, 2016	, if other than the
Effective date if applicable:			
	(no more than 90 do	iys after amendment file date,	
Note: If the date inserted in this block doe document's effective date on the Department		e statutory filing requirement	s, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)		
The amendment(s) was/were adopted by by the shareholders was/were sufficient f		mber of votes cast for the ame	endment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voi			
"The number of votes cast for the a	mendment(s) was/were su	ifficient for approval	
by		,,,	
	(voting group)		
☐ The amendment(s) was/were adopted by action was not required.	the board of directors wit	hout shareholder action and s	hareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without	shareholder action and sharel	nolder
Dated FEBRUAR	24 1,2016		
111	1-11		
Signature \\	Marie		
		- if directors or officers have	
	incorporator – II in the na iary by that fiduciary)	ands of a receiver, trustee, or o	other court
	Walten R	· Bactow	
	(Typed or printed name	ne of person signing)	
	President		
	(Title of m	araan sianina)	