M47663

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COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

\$35 Filing Fee

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

□ \$43.75 Filing Fee &

Certificate of Status

Street Address

☐ \$43.75 Filing Fee &

Certified Copy

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

(Additional copy is enclosed)

□ \$52.50 Filing Fee

Certified Copy

Certificate of Status

(Additional Copy is enclosed)

Articles of Amendment

to

Articles o	f Incor	poration
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of		
STARBRIGHT Dainting, CORP.		
(Name of Corporation as currently filed with the Florida Dept. of State)		
M-47663		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> following amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "company," or "incorporation the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the 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) 15015 56 57 1617		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Mailing address MAY BE A POST OFFICE BOX		
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: Catalino C. Melende Z		
New Registered Office Address: (Florida street address)		
(City) , Florida (Zip Code)		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.		
X		
Stgnature 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
P.	Catalino e. Melendez	15015 SW 57 Kry MICHI, FC 33/53	Add Remove
VP.	Raisa Revez	15015 SW 57 to 8	Add Remove
P.	Jesus Gowsalez	414 SU 60 PC.	☐ Add Remove
	ng or adding additional Articles, enter of litional sheets, if necessary). (Be specifi		
NO	NE		
			
	endment provides for an exchange, recl as for implementing the amendment if n		
	t applicable, indicate N/A)	or contained in the amendment	tiscii.
	0100		
			

The date of each amendment	t(s) adoption:
Effective date if applicable:	(date of adoption is required)
Enective date in applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
* *	are approved by the shareholders through voting groups. The following statement and 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)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Catalino C. Melendez (Typed or printed name of person signing)
	President
	(Title of person signing)