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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099 Phone

: (813)932-5244

Fax Number

: (813)932-3782

Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

info @ activatemulicense. com

ÉOR AMND/RESTATE/CORRECT OR O/D RESIGN CARLISLE CUSTOM PAINTING, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	CARLISLE CUSTOM PAINTING	, INC			
DOCUMENT NU	JMBER:	P0000001192				
The enclosed Artic	cles of Amendment and fe	e are submitted for filing.				
Please return all co	orrespondence concerning	this matter to the following:				
		Name of Contact Person				
	CONTRACTO	RS REPORTING SERVICE, INC	<u> </u>			
		Firm/ Company				
	137	795 N Nebraska Ave				
		Address				
		Tampa, FL 33613				
		City/ State and Zip Code				
	info@act	ivatemylicense.com				
	E-man address. (10 De l	ised for future annual report nonneation)				
For further informa	ation concerning this matte	er, please call:				
	SICA BROWNING	at(813) 932-5	5244			
Name	of Contact Person	Area Code & Daytime Tele	phone Number			
Enclosed is a check	k for the following amount	made payable to the Florida Depart	ment of State:			
5 \$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)			
Mailing Ac		Street Address				
Amendmen			Amendment Section			
P.O. Box 6	Corporations	Clifton Building	Division of Corporations			
		2661 Executive Center Circle				
Tallahassee, FL 32314		Tallahassee, FL 32301				
		a to the temperature of temperature of the temperature of temperature of temperature of temperature of temperature of temperature of temperature o				

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Articles of Amendment to Articles of Incorporation of

To:

FILED

2815 JUL -7 AM 10: 44

TALLANASSEE, FLORIDA

		PAINTING,		, A
(Name of Corporation as	currently fi	led with the Fl	<u>orida Dent.</u>	of State)

P00000001192

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

CARLISLE PAINTINg me must be distinguishable and contain to bbreviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "proj	he word "corporation designation "Corp,"	on," "company," or "Inc," or "Co". A	professional corporatio
Eater new principal office address, if apply the principal office address MUST BE A STREE		PA	
. Enter new mailing address, if applicable:		NA-	
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>	IV R	
(Mailing address MAY BE A POST OFFICE If amending the registered agent and/or registered agent and/or the pew regis	egistered office addr	ess in Florida, enter	the name of the
. If smending the registered agent and/or r	egistered office addr	ess in Florida, enter	the name of the
. If amending the registered agent and/or r new registered agent and/or the new regis	egistered office address:	ess in Florida, enter	the name of the
. If amending the registered agent and/or r new registered agent and/or the new regis Name of New Registered Agent:	egistered office address: NA (Florida sin	ess in Florida, enter eet address)	Florida

Page 1 of 3

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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)

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Remove
			□ Add
			Remove
(attach add	ditional sheets, if necessar	Articles, enter change(s) here: ry). (Be specific)	
provisio	endment provides for an is for implementing the applicable, indicate N/A	n exchange, reclassification, or cancellation of issue amendment if not contained in the amendment itse)	d shares,

Jessica Browning Fax: +1 (813) 932-5244 104	To;	Fax: +1 (850) 617-6380 Page 5 of 5 07/07/2015 3:20 PM (((H15000165931 3)))
The date of each amendment(s) ado	ption: 06/08/2015	
	(date of ado	ption is required)
(no m	ore than 90 days after at	nendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
☑ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders.	The number of votes east for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the sharcholders ch voting group entirled	through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes cast for	the amendment(s) was/	vere sufficient for approval
by	group)	27
☐ The amendment(s) was/were adopt action was not required.	ed by the board of direc	tors without shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ed by the incorporators	without shareholder action and shareholder
Dated_06/08/20	15	
Signatury L		
selected, by		ficer.— if directors or officers have not been he hands of a receiver, trustee, or other court y)
<u></u>	STEVEN	CARLISLE
	(Typed or printed)	name of person signing)
		SIDENT
	(Title of person signin	g)

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