P00000019569

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Thermal Protective	Coatings of Florida, Inc		
	BER: P00000079569			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Rebecca Murphy			
		Name of Contact Person	1	
	Thermal Protective Coatings	of Florida, Inc		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company		
	1412 Intrepid Ave Unit A			
		Address		
	Deland , FL 32724			
		City/ State and Zip Code	e	
	·	•		
tpc((gefl.п.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Rebecca		386 at (de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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 Address Amendment Section		Amend	Address Iment Section on of Corporations	
Division of Corporations P.O. Box 6327		Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Thermal Protective Coatings of Florida,	Inc				
(Name	of Corporation as currently	filed with the	Florida Dept.	of State)	
P00000079569					
	(Document Number of	Corporation (if	fknown)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit C	Corporation ado	pts the following	(amendment(s) to
A. If amending name, enter the new n	ame of the corporation:				
					The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc." or "C	Co". A profess	" or "incorpord sional corporati	ated" or the ab on name must c	breviation
B. Enter new principal office address, (Principal office address MUST BE A S					
					
					
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				5.6	197
(maining dadress MAT BE A 1 031	OFFICE BOX		<u></u>		
					10 1 m
				····	
D. If amending the registered agent ar	nd/or registered office addre	ess in Florida,	enter the name	of the	
new registered agent and/or the ne	w registered office address:				بب ای
Name of New Registered Agent	Joseph R. Raines			••	
- · · · ·	1412 Intrepid Ave Unite A				
	(Florida stre	et address)			
New Registered Office Address;	Deland		ı	Florida 32724	
HE WHO CAN THE	-	City)	, '	(Zip C	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept	the obligations e	of the position	
	a a a	un unu uccepi i	nie vizingamizis (n ine position.	
					-
- The	for It Ban		1/07/1	11/2cm	
	Signature of New Re	· ·			
		only	52917 Less	is chan	s in

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.

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	VP	William K Raines	
Add			
X Remove			
2) Change	ST	Brenda M Raines	
Add			
X Remove			
3) Change	<u>VP</u>	Martin Rosenberg	1412 Intrepid Ave Unit A
X Add			Deland, FL 32724
Remove			
4) Change	ST	Rebecca Murphy	1412 Intrepid Ave Unit A
XAdd			Deland FL 32724
Remove			
5) Change			
Add		,	
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
for any and the second	
provisions for implementing the amor	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
me of mindle mining the Affici	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
•	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 50 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
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)	
☐ 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 4/-25-19	
Dated 4-25-19 Signature A Race	_
(by a director, president or other officer - if 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)	
Joseph R Raines	
(Typed or printed name of person signing)	
President	

(Title of person signing)