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July 1

TO: Amendment Section

Division of Corporations

COVER LETTER

NAME OF COUR	DRATION: True Colors Painti	ng of Naples, Inc.			
DOCUMENT NUM	P00000082904				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	itter to the following:			
	Tyler Johnson				
		Name of Contact Person	<u> </u>		
	Threlkeld Law, P.A.				
	_	Firm/ Company			
	3003 Tamiami Trail North, Suite 400				
	Address				
	Naples, FL 34103				
		City/ State and Zip Cod	e		
	tyler@napleslegal.net				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, plea	se call:			
Tyler Johnson		at (²³⁹	234-5034		
Nam	e of Contact Person		de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Articles of Amendment to Articles of Incorporation of

True Colors Painting of Naples, Inc.		
(<u>Name</u>	of Corporation as currently filed with the Florida Dept. of State)	
P00000082904		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	7.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following a	amendment(s) t
A. If amending name, enter the new n	name of the corporation:	
	7	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	n the word "corporation," "company," or "incorporated" or the abbreviation Corp," "Inc," or "Co". A professional corporation name must contain " or the abbreviation "P.A."	"Corp.," the word
B. Enter new principal office address, (Principal office address MUST BE A S	sif applicable: STREET ADDRESS)	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent arnew registered agent and/or the new registered agent	nd/or registered office address in Florida, enter the name of the	
	Nicole Beres	
Name of New Registered Agent	2220 Crawford Ave.	b)
	(Florida street address)	_
v n ·	Nanles 34117	-1
<u>New Registered Office Address:</u>	:, Plonda	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	changing Registered Agent: Stered agent. I am familiar with and accept the obligations of the position. Docusioned by: Mul Burs Signature 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)

Example:

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>	<u>Name</u>	<u>Addres</u> s	
1) Change	PVTS	Lori Ross Johnson	2220 Crawford Ave.	
Add			Naples, FL 34117	
X Remove				
2) Change	PVTS	Nicole Beres	2220 Crawford Ave.	
X Add			Naples, FL 34117	
Remove Change				,
Add			·	·_
Remove				<u></u>
4) Change			<u></u>	
Add				- -
Remove				· -
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

ttach additional sheets, if necessary). (Be specific)	
	<u> </u>
	
	-
	. <u> </u>
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(y not appreciote, maicute (474)	

	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : _		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date wi Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action an	d shareholder
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
January Dated	12, 2024 DocuSigned by:	
Signature (B)	NORD TO BE SECURISE BY A COUNTY OF THE COUNT	
sele	eted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Lori Ross Johnson	<u>\$</u>
	(Typed or printed name of person signing)	<u> </u>
	President	<u> </u>
	(Title of person signing)	