P03000074316

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ORETARY OF STATE LAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Curtis Remodeling	and Paint Incorporated	
DOCUMENT NUMB	ER: P03000074316		
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.	
Please return all corresp	pondence concerning this mat	ter to the following:	
	JAMES HICKMAN		
-		Name of Contact Person	
	JAD ASSOCIATES		
-		Firm/ Company	
	220 GOVERNMENT AVE STE 8		
-		Address	
	NICEVILLE, FL 32578		
-	-	City/ State and Zip Code	3
JAD.A	ASSOC.15@GMAIL.COM		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	850	. 729-8585
	f Contact Person	at () de & Daytime Telephone Number
	the following amount made p		
□ \$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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Eassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CURTIS REMODELING	Ŕ	PAINT INCORPORATED
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(Name of Corporat	ion as currently filed with the Florida Dept. of St	ate)
	P03000074316	
(Docum	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the	ne following amendment(s) to
A. If amending name, enter the new name of the c	orporation:	
Not Applicable		The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	p," "Inc," or "Co". A professional corporation r	" or the abbreviation ame must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD.		
(Principal office address MOST BE ASTREET AD	<u>DRESS</u>)	
		ALL16
		T P P
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	OX)	<u>22</u>
(
		<u> </u>
		- 2 2
D. If amending the registered agent and/or registe	ered office address in Florida, enter the name of t	he C
new registered agent and/or the new registered	d office address:	
Name of New Registered Agent NO+	Applicable	
	(Florida street address)	
New Registered Office Address:	, Flori	da
Hen Registered Office Haures.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of th	e position.
Thereby decept me appointment at regions ea agem	- am/yamman	•
Sig	nature 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 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>	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>	Address
1)Change	P	CHESTER CURTIS	11 ROUNDABEND RD
Add X Remove			SHALIMAR, FL 32579
2) X Change	P	ERIC CURTIS	707 FAIRVIEW DR
Add			FORT WALTON BCH, FL 32547
Remove			
3)Change			
Add			
Remove			<u></u>
4) Change			
Add			
Remove			- The same of the
5) Change			
Add			
Remove			
6) Change			
Add _			
Remove			

(A	amending or adding additional Ar tach additional sheets, if necessary)). (Be specific)
11	IA'	
10		
	<u> </u>	
11	an amendment provides for an exc rovisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
- 1	(if not applicable, indicate N/A)	issuance if not contained in the amendment user.
1	σ	
4		

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The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable: 09/14/20/6 (no more than 90 days after amendn	
(no more than 90 days after amendn	nent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes can by the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro-	oval
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	on and shareholder
09/14/2016 Dated	
Signature Chee Co	
(By a director, president or other officer – if directors or o selected, by an incorporator – if in the hands of a receiver appointed fiduciary by that fiduciary)	
CHESTER CURTIS	
(Typed or printed name of person signi	ing)
PRESIDENT	
(Title of nerson signing)	