P03000130067

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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C LEWIS



August 31, 2015

EATON TROTMAN / TROTMAN PAINTING & SHEETROCK, INC. 7037 HENNEPIN BLVD. ORLANDO, FL 32818 US

SUBJECT: TROTMAN PAINTING & SHEETROCK, INC.

Ref. Number: P03000130067

We have received your document for TROTMAN PAINTING & SHEETROCK, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 315A00018305

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corpo	rations	_			
NAME OF CORPOR	ATION: $\frac{\sqrt{Rv}}{\sqrt{Rv}}$	tmm Painting 500 130067	- Sheetevek	<u>-</u>	
DOCUMENT NUMB	er: <u>P03</u> 0	500 130067			
The enclosed Articles of	of Amendment and fee are su	ubmitted for filing.			
Please return all corres	pondence concerning this ma	atter to the following:			
	(SATON TRU.	+man		
-		Name of Contact Perso		<u> </u>	
-		Firm/ Company			
	703	7 HENNISP	IN Blip	_	
-		Address	22348		
	OR.	rango FT	32810		
		City/ State and Zip Cod	e		
	E-mail address: (to be u	Address ANDO F7 City/ State and Zip Cod MC. TRO MA sed for future annual report	n @ hotmall. (<u>lor</u>	
For further information	concerning this matter, plea-	se call:			
_ 5Ato	r Trotman	at (321	, 439-37	95	
Name o	f Contact Person	Area Co	de & Daytime Telephone	Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa			
□ \$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	PREVIOUSLY \$25.00	Submitter
			is enclosed)	HOE A	
Mail	ing Address	Street	Address	MY2.10	
	ndment Section		Iment Section		
	ion of Corporations	Divisio	on of Corporations		
	Box 6327		Building		
Talla	hassee, FL 32314	2661 E	Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

	Articles of Incorporation of		
Tootman) <	L	TAC.
(Name of Cornorat	ion as currently filed with the	Florida Dept. of State)	,
(Maine of Corporat	Da 2000 17	x \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
(Document)	ment Number of Corporation (if I	OOQ (
(Docui	nent Number of Corporation (II)	MIOWII)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Co	prporation adopts the following a	mendment(s) to
A. If amending name, enter the new name of the c	orporation:		
		T_{i}	he new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co". A professi	or "incorporated" or the abbi	reviation
B. Enter new principal office address, if applicable			
(Principal office address <u>MUST BE A STREET AD</u>	DRESS)		方影
		***************************************	香
C. Enter new mailing address, if applicable:			رن الان الانتخاص
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		— <u> </u>
			— <u> </u>
			7
D. If amending the registered agent and/or registered new registered agent and/or the new registered		nter the name of the	
	office dadiess.		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	(2)	, Florida	
	(City)	(Zip Coa	le)
New Registered Agent's Signature, if changing Re	gistered Agent:		
I hereby accept the appointment as registered agent.	I am familiar with and accept th	ne obligations of the position.	
•			
Sigr	nature of New Registered Agent,	if changing	
	, G		

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	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	(£0	ENton TROTMAN	3037 HENNEPIN BLUD DRIMMETI
AddRemove			32818
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add			

	(Be specific)	
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
provisions for implementing the am	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the am	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the am	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
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provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	

The date of each amendment(s) 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 this block does not me document's effective date on the Department of State'	et the applicable statutory filing requirements, this date will not be listed as the s records.
Adoption of Amendment(s) (CHECK	<u>ONE</u>)
The amendment(s) was/were adopted by the shareholders was/were sufficient for approv	nolders. The number of votes cast for the amendment(s) al.
must be separately provided for each voting group	cholders through voting groups. The following statement of entitled to vote separately on the amendment(s):
"The number of votes cast for the amendmen	t(s) was/were sufficient for approval
by(voting gr	
(voting gr	roup)
☐ The amendment(s) was/were adopted by the board action was not required.	t(s) was/were sufficient for approval of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder action and shareholder
Dated 10/20/15	
Signature Cuth	milmo
	or other officer – if directors or officers have not been
selected, by an incorpora appointed fiduciary by th	tor – if in the hands of a receiver, trustee, or other court at fiduciary)
	EATON TROTMAN
	d or printed name of person signing)
	CEO
	(Title of person signing)