## P03000140663

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cid	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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Amend

APR 0 6 2019

I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	PREMIZI	R PAINTING 7	REMODELING, INC
DOCUMENT NUMBER:	PO 30	00/40663	, 
The enclosed Articles of Amendme	nt and fee are sub	mitted for filing.	
Please return all correspondence co	ncerning this matte	er to the following:	
	Ct	IRB BUTTS  Name of Contact Person	
		Name of Contact Person	n
<u> </u>	PR	EMIER PAINTIN	G & REMODELING
		Firm/ Company	
·	211	16 LONG AVE	<u> </u>
		Address	
	PORT	STJOS, FL City/ State and Zip Cod	32456
		City/ State and Zip Cod	e
		d for future annual report	nail, com notification)
For further information concerning	mis matter, piease	Car.	
CHRIS BUTT	2	at ( 850	) 527-0989
Name of Contact Pc	rson	Area Co	de & Daytime Telephone Number
Enclosed is a check for the followin	g amount made pa	yable to the Florida Depa	artment of State:
	5 Filing Fee & cate 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 Secti			Address Iment Section
Division of Corpo			on of Corporations
P.O. Box 6327		Clifton	Building

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation

of

PREMIER PAINT	ING Y REMODELING, INC Irrently filed with the Florida Dept. of State)
	· · · · · · · · · · · · · · · · · · ·
PD 3000/40 (Document Nu	mber of Corporation (if known)
	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
	The new
	poration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the ation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent	
(Flo	rida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	
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)

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 Johr	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y <u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	<u></u>	WILLIE RILEY	110 AVE A
Add		·	PORT ST JOE, FL 32456
Remove			
2) Change	<u></u>	MITCHELL FRASE	11636 SE CHIPOLA ARRD
X_ Add			KINARD, FL 32449
Remove			
3 ) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	*****		
Add			
Remove			

	(Be specific)
	***
<u> </u>	
***	
	- 44.
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
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provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s) adoption: _	3-25-19	, if other than the
date this document was signed.		
Effective date if applicable:	MARCH 25, 2019 (no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, of State's records.	this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amend approval.	dment(s)
	he shareholders through voting groups. The following ag group entitled to vote separately on the amendment(	
"The number of votes cast for the am	endment(s) was/were sufficient for approval	
by	oting group)	
(vi	oting group)	
The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareho	lder
Dated3 -	25-19	
Signature	CARTO	
	sident or other officer - if directors or officers have no	
	corporator - if in the hands of a receiver, trustee, or oth	er court
appointed fiducia	ry by that fiduciary)	
	CHRIS BUTIS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	