P04000017372

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Carulle adoption of Amadomat by Heliphon Carulle TR 9/29
Amud mut by
telephone can TR 9/29

Office Use Only



800079853208

09/28/06--01017--005 **35.00

Anne

FILED

06 SEP 28 AM IO: 53

SEURETARY OF STATE
AREA OR STATE

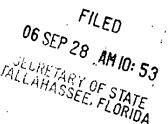
Thought SEP 2 9 2000

COVER LETTER

FO: Amendment Section Division of Corporations

NAME OF CORPORATION: BEST PAIN	NTING SERVICES, INC.	
DOCUMENT NUMBER: P04	4000017372	
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
LUZMIL	A ARROYAVE	
	of Contact Person)	······································
BEST PAINT	ING SERVICES, INC.	
(Fir	m/ Company)	
	121 STREET AVE	
	(Address)	
	A, FL. 33612	· ·
	ate and Zip Code)	
For further information concerning this matter,	please call:	
LUZMILA ARROYAVE	at (<u>813</u>) <u>264-19</u> (Area Code & Daytime	
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:		
✓ \$35 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle

Articles of Amendment to Articles of Incorporation of



BEST PAINTING SERVICES, INC.

			020, 1110.	
(1	Name of corporation as	currently filed with	the Florida Dept. of	State)
				•
,	·	P04000017372		
		number of corporation	on (if known)	
	`		(
Pursuant to the provision	ons of section 607.1	006, Florida Stati	ites, this <i>Florida</i>	Profit Corporation
dopts the following an	nendment(s) to its A	Articles of Incorpo	oration:	
JEW CODDOD ATE :	NAROS CELLA			
EW CORPORATE	NAME (II changin	<u>(g):</u>	•	
· .				
Must contain the word "cor	poration," "company,"	or "incorporated" or	the abbreviation "Co	orp.," "Inc.," or "Co.")
A professional corporation	must contain the word	"chartered", "profess	ional association," o	r the abbreviation "P.A.
MENIDMENTS ADO	DTED OTHER	THE ART REAR OF	SEE A BY CORD Y . I'	
MENDMENTS ADO nd/or Article Title(s) b	<u>Priep</u> - (OTHER Jeing amended, add	I HAN NAME (ed or deleted: (RI	CHANGE) Indica	ate Article Number(
			SFECIFIC)	
DELETE ART VI	II: HERRERA	A, TULIO -	TITLE:	VP
ADD ARTICLE VI	I: FUENTES D	<u>OOMINGUEZ,</u>	GERARDO	- TITLE: VP
······································				
	<u> </u>	·		
	<u>-</u>			
		•		
				·
	-			

(Attach additional pages if necessary)

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

(continued).

The date of each amendment(s) adoption: 09/26/2006	
Effective date if applicable: 09/26/2006	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were approved by the shareholders. The number of votes the amendment(s) by the shareholders was/were sufficient for approval.	cast for
The amendment(s) was/were approved by the shareholders through voting groups following statement must be separately provided for each voting group entitled to separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for appro	oval by
(voting group)	
The amendment(s) was/were adopted by the board of directors without sharehold and shareholder action was not required.	er action
The amendment(s) was/were adopted by the incorporators without shareholder ac shareholder action was not required.	tion and
	÷
Signature (By a director, president of other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)	t
LUZMILA ARROYAVE	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	
FILING FEE: \$35	

.