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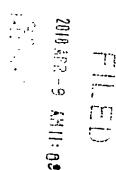
(R	equestor's Name)	
(A	ddress)	_ <del></del>
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(C	ity/State/Zip/Phone #	<del>)</del>
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	)
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AMERICAN CHO	ICE PAINTERS OF CENT	FRAL FLORIDA INC
	BER: P04000049084		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	RAQUEL MOWRER		
		Name of Contact Person	1
	OGC ASSOCIATES PA		
		Firm/ Company	<del></del>
	7065 WESTPOINTE BLV S	UITE 205	
		Address	
	ORLANDO- FL 32835		
		City/ State and Zip Cod	e
wosł	eyusa2012@hotmail.com		
	· -	sed for future annual report	notification)
For further informatic	on concerning this matter, pleas	se call:	
RAQUEL MOWRE	₹ –	407 at (	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	343.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address mendment Section Tision of Corporations D. Box 6327 Inhassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

AMERICAN CHOICE PAINTERS OF CENTRAL FLORIDA INC

(Name of Corporation as currently	filed with the Florida Dept. of State)	
P04000049084		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following	amendment(s) t
A. If amending name, enter the new name of the corporation:		
AMERICAN CHOICE CONSTRUCTION INC	5	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	o". A professional corporation name must co	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	7 C C C C C C C C C C C C C C C C C C C	= ====================================
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stre	et address)	
New Registered Office Address:	Florida	<u>.</u>
	City) (Zip Co	ode)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar w	ith and accept the obligations of the position.	
Cimmon Chim B	egistered Avent 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	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			<u></u>
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
-		
-		
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		_

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ıt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the hoard of directors without shareholder action and shareho action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  Dated  Signature	
(By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	en Hirt
WOSLEY RUFINO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	