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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	Accu-Rite Painting, Inc	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER:		P04000061616	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning thi	is matter to the following:	
		Diana Villani	
	N	Jame of Contact Person	
	Acc	cu-Rite Painting, Inc.	
		Firm/ Company	
		105 Elissar Dr.	
•		Address	
		Debary, FL 32713	
	C	City/ State and Zip Code	
	E-mail address: (to be use	d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
,	Diana Villani	at (407)22	27-9900
Name	e of Contact Person	Area Code & Daytime Tele	
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depart	ment of State:
☑ \$35 Filing Fee	\$43.75 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)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment

i	Articles of Incorporation of	17/1/2
	Accu-Rite Painting, Inc.	- JUL - I PL
	(Name of Corporation as currently filed with the Florida Dep	t. of State)
	P0400061616	- STORY
	(Document Number of Corporation (if known)	CORIGA

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

	inting & Renovations, Inc.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to name must contain the word "chartered," "p	he designation "Corp," "Inc," or "Co	". A professional corporation
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o new registered agent and/or the new re		enter the name of the
Name of New Registered Agent:	Kelley & Associates, LLC	
New Registered Office Address:	30 Skyline Dr., Suite 200 (Florida street address)	.
	Lake Mary	, Florida <u>32746</u>
	(City)	(Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registered	ging Registered Agent: d agent. Pam familiar with and accept	t the obligations of the position.
_	Signature of New Registered Agent, in	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			
	ding or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
			,
	,		
<u> </u>			
<u>provisi</u>	mendment provides for an exchange, rions for implementing the amendment not applicable, indicate N/A)		
	· · · · · · · · · · · · · · · · · · ·		

The date of each amendmen	t(s) adoption: June 1, 2010
Effective date <u>if applicable</u> :	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more man 30 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemen ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated_June Signature (By sele	e 1, 2010 y a director, president or other officer – if directors or officers have not been ected, by an incorporator – If in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	_ Diana Villani
	(Typed or printed name of person signing)
	President
	(Title of person signing)