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| Special Instructions to Filing Officer: |
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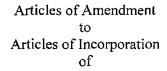
COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COI | RPORATION: TAVARES PAIN | NTING SERVICES, INC | |
|--------------------|--|---|---|
| DOCUMENT N | UMBER: P05000013804 | | |
| The enclosed Arr | ticles of Amendment and fee a | re submitted for filing. | |
| Please return all | correspondence concerning thi | s matter to the following: - | • |
| CL | AUDIO RIBEIRO | | |
| _ | (Name o | of Contact Person) | |
| TA | XPLACE CORP | | |
| _ | (Fir | rm/ Company) | |
| 272 | 21 S. US 1 SUITE 9 | | |
| | | (Address) | |
| FO | RT PIERCE, FL 34982 | | |
| <u> </u> | (City/ Si | tate/ and Zip Code) | |
| For further inform | nation concerning this matter, | please call: | |
| CLAUDIO RIBEIR | RO | at (772) 460-79 | |
| (Na | me of Contact Person) | (Area Code & Daytin | me Telephone Number) |
| Enclosed is a che | eck for the following amount: | | |
| □ \$35 Filing Fee | | ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| A D | Iailing Address mendment Section ivision of Corporations O. Box 6327 | Street Address Amendment Sec Division of Corp 409 E. Gaines S | ction porations |

Tallahassee, FL 32314

Tallahassee, FL 32399





TAVARES PAINTING SERVICES, INC

(Name of corporation as currently filed with the Florida Dept. of State)

| P05000013804 | • | |
|---|---------------------------------------|-------------------|
| (Document number o | of corporation (if known) | |
| the provisions of section 607.1006, Flooling amendment(s) to its Articles | · · · · · · · · · · · · · · · · · · · | rofit Corporation |

NEW CORPORATE NAME (if changing):

| (Must contain the word "corporation," "company," or "incorporated" or the abb (A professional corporation must contain the word "chartered", "professional as | reviation "Corp.," "Inc.," or "Co.") ssociation," or the abbreviation "P.A.") |
|---|---|
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHAN and/or Article Title(s) being amended, added or deleted: (BE SPEC | |
| Autolo VIII Officers and Discontinue of the Commentation Added | |
| New Shareholder - Name: Roberty Oliveira - Address: 905 Mades Dr., F | fort Pierce, FL 34947 |
| | |
| The Corporation shall now have 3 directors: | |
| - Leonardo Tavares - President/Director | |
| - Helio Goncalves da Rocha - Director | <u> </u> |
| - Roberty Oliveira - Director | |
| | en e |
| (Attach additional pages if necessary | y) |
| If an amendment provides for exchange, reclassification, or cancel for implementing the amendment if not contained in the amendme | llation of issued shares, provisions |
| | |
| | |
| | |

(continued)

Article II

The principal place of business address:

The New principal place of business is:

330 Rockland Dr. Fort Pierce, FL 34947

The mailing address of the corporation.

The New mailing address of the corporation is:

330 Rockland Dr. Fort Pierce, FL 34947

| The date of each amendment(s) adoption: 05/03/2005 |
|--|
| Effective date if applicable: |
| (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 cast for the amendment(s) by the shareholders was/were sufficient for approval. |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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) |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. |
| Signed this 3rd day of May 2005 |
| Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| Leonardo Tavares (Typed or printed name of person signing) |
| President / DIFECTOR (Title of person signing) |

FILING FEE: \$35