P05000140469

(Re	questor's Name)	
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Amend M



Roberts SEP 20 2010



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2010

GRICEIDA CAROLINA VITERI FAS COLORS & DETAIL CORP 3912 NW 62 ST COCONUT CREEK, FL 33073

SUBJECT: FAS COLORS & DETAIL CORP

Ref. Number: P05000140469

We have received your document for FAS COLORS & DETAIL CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the title(s) of each officer in your document.

Show titles such as R,V,S,T,D. O is not a title.

Please return your document, along with a copy of this letter; within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 410A00021432

COVER LETTER

TO: 'Amendment Section Division of Corporations

NAME OF CORPOR	RATION:F	AS COLORS & DETA	IIL, CORP
DOCUMENT NUMI	BER:	P050001404	469
The enclosed Articles	of Amendment and fee ar	re submitted for filing.	
Please return all corre	spondence concerning this	s matter to the following:	
	GRICEIDA	A CAROLINA SALVADOR	!
	N	ame of Contact Person	
	FAS COI	LORS & DETAIL, CORP	
		Firm/ Company	
		3912 NW 62 ST	
		Address	
	COCOI	NUT CREEK FL 33073	
	Ci	ty/ State and Zip Code	
	E-mail address: (to be used	d for future annual report notificat	ion)
For further informatio	n concerning this matter,	please call:	
GRICEIDA CA	ROLINA SALVADOR		661-0833
	Contact Person	Area Code & Daytir	ne Telephone Number
Enclosed is a check for	r the following amount m	ade payable to the Florida D	Department of State:
✓ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclo	Sed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr		Street Address	
Amendment Section		Amendment Section	ne
Division of Corporations P.O. Box 6327		Division of Corporation Clifton Building	15
P.O. BOX 0327 Tallahassee, EL 22314		2661 Evecutive Center	Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

FAS COLORS & DETAIL CORP

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

P05000140469

(Document Number of Corporation (if known)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FAS COLORS & DE- name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designation name must contain the word "chartered," "professional and B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRES	"corporation," "company," or "incorporated" or the n "Corp," "Inc," or "Co". A professional corporation ssociation," or the abbreviation "P.A." 3912 NW 62 ST SSS)
abbreviation "Corp.," "Inc.," or Co.," or the designation ame must contain the word "chartered," "professional acts. B. Enter new principal office address, if applicable:	n "Corp," "Inc," or "Co". A professional corporation ssociation," or the abbreviation "P.A." 3912 NW 62 ST SS)
	(22
Principal office address <u>MUST BE A STREET ADDRE.</u>	
	COCONUT CREEK FL 33073
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3912 NW 62 ST
	COCONUT CREEK FL 33073
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office	
Name of New Registered Agent: GRICEII	DA SALVADOR
3912 NV	V 62 ST
New Registered Office Address:	(Florida street address)
COCONI	JT CREEK , Florida 33073
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	
	City) (Zip Code)

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>	<u>Address</u>	Type of Action
<u>P.</u>	GRICEIDA SALVADOR	3912 NW 62 ST COCONUT CREEK FL 33073	☐ Add ☐ Remove
<u>VP.</u>	GRICEIDA SALVADOR	3912 NW 62 ST COCONUT CREEK FL 33073	. ☑ Add □ Remove
P	FABIAN SALVADOR	3912 NW 62 ST COCONUT CREEK FL 33073	. □ Add ☑ Remove
(attach a 1 ARTIC	ding or adding additional Articles, en additional sheets, if necessary). (Be sp CLE IV: THE NUMBER OF SHAR E IS 100. CLE VII: THE PRESIDENT AND	ecific) ES THE CORPORATION IS AU	
provis	mendment provides for an exchange, ions for implementing the amendment not applicable, indicate N/A)		

The date of each amendmen	it(s) adoption: <u>09</u>	9/01/2010
Effective date <u>if applicable</u> :	09/01/2010	(date of adoption is required)
	(no more than 9	00 days after amendment file date)
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		te shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	dment(s) was/were sufficient for approval
by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
Dated_09/	13/2010	
Signature _	Cler	
set	y a director, presid lected, by an incorpointed fiduciary b	tent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
	GRI	CEIDA SALVADOR-PRESIDENT
	(Ту	ped or printed name of person signing)
	Rei	sident
	(Title o	f person signing)