

FD5000145443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

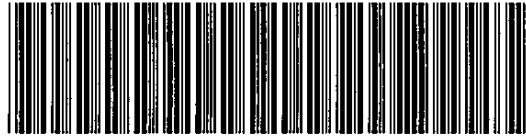
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts JUN 16 2006

LAW OFFICES
DULMER & TRACY
CHARTERED

JOHN J. DULMER, JR.
DENNIS J. TRACY

TELEPHONE
(941) 485-7761
TELECOPY
(941) 488-9482

June 8, 2006

Corporate Records Bureau
Division of Corporations
Secretary of State
P.O. Box 6327
Tallahassee, Florida 32301

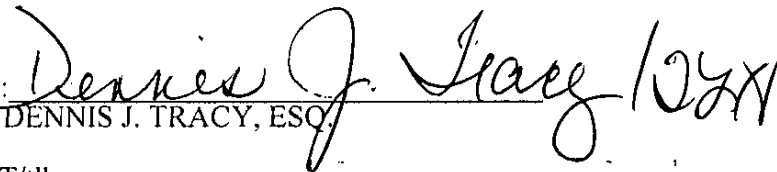
Re: B.I.G. Painting, Inc.

Dear Sir/Madam:

Enclosed herewith please find an original and one copy of the Articles of Amendment in connection with the above referenced matter. In addition, please find our client's check in the amount of \$43.75 representing filing fees with regard to same. Kindly return a certified copy of the Articles to this office in the envelope provided herein for your convenience.

Should you have any questions, please feel free to contact the undersigned. Thank you for your kind courtesies and prompt attention to this matter.

Very truly yours,
DULMER & TRACY, CHARTERED

By: 
DENNIS J. TRACY, ESQ.

DJT/tlh

ARTICLES OF AMENDMENT
OF
B.I.G. PAINTING, INC.

Pursuant to Florida Statutes Section 607.1006, the Articles Of Incorporation of the above
named corporation are hereby amended as follows:

1. Article I, NAME, is hereby amended to read as follows:

ARTICLE I

NAME

The name of this corporation is **SEA SPRAY VIDEO PRODUCTIONS, INC.**

2. The forgoing amendment was adopted on June 1, 2006.
3. The amendment was adopted by the Board of Directors as well as by all of the
shareholders entitled to vote on the amendment.

IN WITNESS WHEREOF, THE UNDERSIGNED HAS EXECUTED THESE ARTICLES
OF AMENDMENT, THIS 7th day of June, 2006.

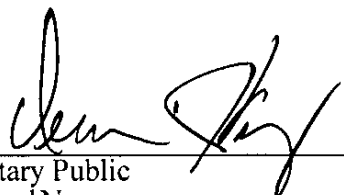

ROBERT J. HAGEMIERE, President

FILED
06 JUN 12 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

COUNTY OF SARASOTA:

The foregoing instrument was acknowledged before me this 7th day of June, 2006, by **ROBERT J. HAGEMIERE**, President of **B.I.G. PAINTING, INC.** ☒ who is personally known to me or ☐ who has produced _____ as identification and who did take an oath.



Notary Public
Typed Name _____
My Commission Expires: _____

