Division of Corporations Page 1 of 1 Ĵ **Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H09000124880 3))) H090001248803ABC% Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: 7009 HAY Division of Corporations Fax Number : (850)617-6380 From: 6 Account Name : FASTKIT CORPORATE OUTFITS Account Number : 071001002335 AH Phone : (305)599-0839 : (305)716-0346 Fax Number œ 00 ഹ RECEIVED . Ö 2009 HAY 19 AN OR AMND/RESTATE/CORRECT OR O/D RESIGN **ONE WAY PAINTING & DRYWALL, CORP.** Certificate of Status 0 Certified Copy 0 03 Page Count \$35.00 Estimated Charge 5.20°° **Electronic Filing Menu** Corporate Filing Menu He

https://efile.sunbiz.org/scripts/efilcovr.exe

EILED 2009 MAY 19 AM 8: 19 TALLAHASSEE. FLORIDA

to Articles of Incorporation of

ONE WAY PAINTING & DRYWALL, CORP.

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

P06000007641

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

]

ONE WAY PAINTING CP, CORP. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp,," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

<u>New Registered Office Address</u> :	(Florida street address)	
		, Florida
	(City)	(Zip Code)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 3

Add Remove

☐ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:

.

(attach additional sheets, if necessary). (Be specific)

Ĺ

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

.

.

Page 2 of 3

2

05-12-09:11:21AM:ads

2

Ų.

:305	639	4725
------	-----	------

\$ 4/ 4

5-19-09 The date of each amendment(s) adoption:

Effective date if applicable:

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

Ъγ

(CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The smendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each valing group entitled to vote separately on the amendment(s):

"The pumber of voles cast for the amondment(s) was/were sufficient for approval

(voting group)

- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amondmenn(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

5-19-09 Dated Signature VENN

(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)

Neesber Sema

(Typed or printed name of person signing)

(Title of person signing)

Page 3 of 3