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P06000068408

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KATE	PAINTS, IN	10
DOCUMENT NUMB		0068408	
The enclosed Articles of	of Amendment and fee are sub	mitted for filing.	
Please return all corresp	pondence concerning this matt	er to the following:	
	KAT	THRYN CUMI	TINS
-		Name of Contact Persor	
_	_ K	MEPAINTS	INC.
		Firm/ Company	
	5500	55th St	
-		Address	
	ST. P	ETERSBURG	5 FL 33709
-	······································	City/ State and Zip Code	
	K	atime 4400	smail.com
-	E-mail address: (to be use	ed for future annual report	notification)
	n concerning this matter, please		
KATHRY Name o	A CUMMIN of Contact Person	at (727 Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:			
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
Amendment Section			Iment Section on Corporations
Division of Corporations P.O. Box 6327			entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

KATE PAINTS, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P06000068408 (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: 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. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Kathryn Cummins Name of New Registered Agent (Florida street address) Florida New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: 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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	DP	Kathryn Cummins	5500 55th Street North
Add	•		St. Petersburg fl 33709
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	eets, if necessary). (ве ѕресіліс)			
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		l control of			
rovisions for impl	ovides for an exchan lementing the amend	ment if not contain	ed in the amendme	nt itself:	
(if not applicabl	le, indicate N/A)				
			<u>-</u>		
		<u> </u>		<u></u>	<u> </u>
<u>-</u>			··········		<u>.</u>
	 				
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The date of each amendment(s) adoption: _	29/09/2024	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amenda	nent file date)
	(no more than 90 days after amenan	gern fire dures
Note: If the date inserted in this block does redocument's effective date on the Department of	not meet the applicable statutory filing of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors w	ithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes car approval.	ast for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	he shareholders through voting groups. g group entitled to vote separately on t	The following statement he amendment(s):
"The number of votes cast for the ame	endment(s) was/were sufficient for app	roval
by		·"
(vo	oting group)	
29/09/2024		
Dated		
Signature	sident or other officer - if directors or	officers have not been
selected, by an inc	corporator – if in the hands of a receive	er, trustee, or other court
	ry by that fiduciary)	
Kathryn C	Cummins DP	
	(Typed or printed name of person sign	ning)
	(Title of person signing)	