P06000069500

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Johnson Custom Pa	ainting Co	
DOCUMENT NUMB	ER: P06000069588		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	Tina Johnson		
-		Name of Contact Persor	1
	Johnson Custom Painting Co		
•		Firm/ Company	
	1205 Moore Ave		
-		Address	
	Lehigh Acres, Fl 33972		
-		City/ State and Zip Code	
johnso	ontina3@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Tina Johnson		at (²³⁹	2183669
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Johnson Custom Painting Co (Name of Corporation as currently filed with the Florida Dept. of State) P06000069588 (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: 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: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) 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

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)

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.

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	S	Randy W Johnson Jr	810 Alaska Ave	
X Add			Lehigh Acres Fl 33971	
Remove				
2) X Change	VP/T	Tina Johnson	1205 Moore Ave	
Add			Lehigh Acres, Fl 33972	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
Kelleve				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Atta	ch additional sheets, if necessary). (Be specific)	
•		
		,
pro	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) W Johnson 45% of Shares	
`ina M	Johnson 45% of Shares	
andy	W Johnson Jr 10% of Shares	

	January 1 2018	
The date of each amendmen	(s) adoption:	, if other than the
date this document was signed		
F60-41 4-4-1611	January 1 2018	
Effective date <u>if applicable</u> :	(no more than 90 days o	after amendment file date)
	this block does not meet the applicable state. The Department of State's records.	atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we by the shareholders was/w	e adopted by the shareholders. The number ere sufficient for approval.	r of votes cast for the amendment(s)
	re approved by the shareholders through voile for each voting group entitled to vote set	
	cast for the amendment(s) was/were suffic	* *
by	(voting group)	"
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without the adopted by the incorporators without sha	t shareholder action and shareholder
action was not required.	e adopted by the incorporators without sna	renolder action and snareholder
12/11 Dated	/2017	
S	y a director, president of other officer – if elected, by an incorporator – if in the hands oppointed fiduciary by that fiduciary)	
	Tina M Johnson	
	(Typed or printed name or	f person signing)
	VP/T	
	(Title of perso	on signing)