POUDOO 19125

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	-
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Вс	usiness Entity Nar	me)
(Dc	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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10/16/12--01021--007 **43.75

ENISTRATEGRAPHICA SE

Amend CC 10 10/11/12

COVER LETTER

TO: Amendment Sec Division of Corp				常 力:
	RATION: EASY PAIN		, INC	
DOCUMENT NUM	BER: <u>P0600007972</u>	5		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing,		
Please return all corre	spondence concerning this mat	iter to the following:		
	Claudia Guerrero			
		Name of Contact Persor	1	-
	Preferred Accoun	tax Center Inc.		
		Firm/ Company		
	4169 NE 14th St			
		Address		
	Homestead, FI 33	3033		
		City/ State and Zip Code		
cla	udia867@bellsout	h net		
		ed for future annual report	notification)	
		,		
For further information	n concerning this matter, pleas	e call:		
Claudia Gue	rrero	_{at (} 786	, 299-0771	
Name	of Contact Person	* * * * * * * * * * * * * * * * * * * *	de & Daytime Telephone Num	ber
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment 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)	
	iling Address		Address	
	endment Section ision of Corporations		ment Section n of Corporations	
P.O	, Box 6327	Clifton	Building	
Tall	ahassee, FL 32314		xecutive Center Circle ssee, FL 32301	
		1 411441144	HOWER BY WING UT	

Articles of Incorporation

Articles of Amendment



EASY PAINT SOLUTIONS, INC

(Name of Corporation as currently filed with the Florida Dept. of State) P06000079725

(Document Number of Corporation (if known)

endment(s) to

A. If amending name, enter the new na	me of the corporation:		
N/A			
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc." or "C	o". A profess	" or "incorporated" or the al- sional corporation name must c
D. Entanness principal office address	if anntiachtar	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
		<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
, 6			
			<u></u>
			
D. If amending the registered agent an		ess <u>in Florida,</u>	enter the name of the
new registered agent and/or the nev	MONICA ABAD		
Name of New Registered Agent			
	10641 SW 103rd		
	(Florida stre	ei address)	22470
New Registered Office Address:	Miami		Florida 33176
	(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)

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> <u>Joh</u>	un Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l)Change	PSTD	YOEL ABAD	10641 SW 103rd ST
Add			Miami, FL 33176
X Remove			
2) Change	PSTD	MONICA ABAD	10641 SW 103rd ST
X Add			Miami, FL 33176
Remove			
3) Change			
Add			
Remove			
4) Change	 		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding addition: (Attach additional sheets, if neces.)	<u>al Articles, ente</u> s sary). — (Be spec	<u>r change(s) here</u> : cific)	:		
I/A					
					_
					_
		<u> </u>			
PHE 141-					
					_
If an amendment provides for a	ın exchange, rec	lassification, or	cancellation of iss	ued shares,	
provisions for implementing the (if not applicable, indicate in the control of th	<u>ie amendment il</u> WA)	<u>Inot contained in</u>	n the amendment	itself:	
√ /Α	r				
				·····	
					

The date of each amendment(s)	adoption: 10/13/2012
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated_10/1;	3/2012
Signature (By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Monica Abad
	(Typed or printed name of person signing)
	President
	(Title of person signing)