P06000/03336

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
•	•	·
(Do	cument Number)	
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Certified Copies	Certificates	s of Status
	_	
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31/15/04 OF CORPORATION 31/15/04 OF CORPORATION

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COVER LETTER

TO: Amendment Section
Division of Corporations

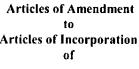
Tallahassee, FL 32314

NAME OF CORPORA	ATION: IN AND OUT PRO	OJECTS CORPORATIO	ON
DOCUMENT NUMBI		···	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
(CLAUDIA ELENA ACOST	A CANO	
_		Name of Contact Pe	rson
ľ	N AND OUT PROJECTS C	ORPORATION	
	·	Firm/ Company	
3	30 GRAY STONE BLVD		
		Address	
I,	DAVENPORT, FL, 33837		
_		City/ State and Zip C	Code
PAINT	ING@INANDOUTPROYE	CTS.COM	
	E-mail address: (to be us	sed for future annual rep	ort notification)
For further information	concerning this matter, pleas	se call:	
CLAUDIA E. ACOSTA	A	754 at (204-5658
Name of	Contact Person		Code & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida D	repartment of State;
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Ame Div	eet Address endment Section ision of Corporations ton Building

2661 Executive Center Circle

Tallahassee, FL 32301

to Articles of Incorporation



IN AND OUT PROJECTS CORPORATION

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

P06000103336			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	'.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following ame	ndment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A		Tha	new'
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbrevi "Co". A professional corporation name must contai	iation
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address MUST BE A S			
			
C. Enter new mailing address, if appl		N/A	
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		
D. If amonding the negletoned areas		land to Plantile and the Col	_
D. If amending the registered agent an new registered agent and/or the ne	w registered office addres	s:	
Name of New Registered Agent	CLAUDIA E. ACOSTA		
	330 GRAY STONE BLV	D	
	(Florida si	reet address)	
New Registered Office Address:	DAVENPORT	. Florida 33837	
		(City) (Zip Code)	
New Designand Agent's Clareton if	handan Dadatan Assa		
New Registered Agent's Signature, if c I hereby accept the appointment as regis	tered agent. I am familiar	<u>u</u> with and accept the obligations of the position.	
		, C ,	
6	I'm don	Chery Deno	
	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 Do	<u>De</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	_Title		Name	<u>Addres</u> s
1) Change	PT		CLAUDIA E. ACOSTA	 330 GRAY STONE BLVD
X Add	•	_		DAVENPORT, FL, 33837
Remove				
2) X Change	V	_	SANDRA PINEDA	 330 GRAY STONE BLVD
Add				DAVENPORT, FL, 33837
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Demaye				

E. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
N/A - '	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment i not contained in the amendment risen:
N/A	
· · · · · · · · · · · · · · · · · · ·	

• •	09/15/2016	
The date of each amendment(s date this document was signed.) adoption:	, if other than the
	9/15/2016	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file d	ate)
Note:. If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirem Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the a sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The follofor each voting group entitled to vote separately on the amenda	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action an	d shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and sha	archolder
09/15/2 Dated	016	
Signature	Um der Elezh Dert	D I
sele	a director, president or other officer – if directors or officers had cted, by an incorporator – if in the hands of a receiver, trustee, cointed fiduciary by that fiduciary)	
	CLAUDIA E. ACOSTA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	