

Florida Department of State
Division of Corporations
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
BLUE RHINO SPECILTY WALL FINISHES, INC.**

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BLUE RHINO SPECILTY WALL FINISHES, INC.

DOCUMENT NUMBER: P07000021369

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

STALEY WEIDMAN

Name of Contact Person

CHECK MATE LICENSING SERVICE

Firm/ Company

4411 BEE RIDGE RD #257

Address

SARASOTA, FL 34233

City/ State and Zip Code

LICENSING@CHECKMATEPLACE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STALEY

Name of Contact Person

at (941)

366.1819

Area Code & 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

850-817-6381

10/26/2010 9:53:53 AM PAGE 1/001 Fax Serve



October 26, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BLUE RHINO SPECILTY WALL FINISHES, INC.

2672 LAKE SHORE DR

ORLANDO, FL 32803-1337

SUBJECT: BLUE RHINO SPECILTY WALL FINISHES, INC.

REF: P07000021369

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H10000232780
Letter Number: 210A00025198

10/26/2010

Articles of Amendment
to
Articles of Incorporation
of

BLUE RHINO SPECILTY WALL FINISHES, INC.

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

P07000021369

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 OCT 27 AM 8:34

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:

BLUE RHINO SPECIALTY WALL FINISHES, INC.

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:

Name of New Registered Agent.

New Registered Office Address:

(Florida street address)

_____, Florida
(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

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

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)

The date of each amendment(s) adoption: OCTOBER 20, 2010
(date of adoption is required)

Effective date if applicable: OCTOBER 29, 2010
(no more than 90 days after amendment file date)

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

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)

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

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/25/2010

Signature Eric J. Gray
(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)

ERIC J. GRAY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)