## P07000048643

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Cal's Painting, Inc	·	
DOCUMENT NUME	BER:	<u></u>	
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.	
Please return all corres	spondence concerning this ma	atter to the following:	
	Gary Ravenscroft		
		Name of Contact Perso	<del></del>
	Cal's Painting, Inc.		
		Firm/ Company	
	317 Cardinal	, ,	
•	Address		
	Jensen Beach, FL 34957		
•		City/ State and Zip Coc	
11			
Cai.cai	spainting@gmail.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Gary Ravenscroft		at (	631-8525
Name o	f Contact Person		ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Division Clifton	Address  Iment Section  on of Corporations  Building  Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Cal's Painting, Inc.	
(Name of Corporation as	currently filed with the Florida Dept. of State)
P07000048643	2019 JUL 12 P 2-53
	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	tion:
	The new
name must be distinguishable and contain the word "con" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc. word "chartered," "professional association," or the abbrev	rporation." "company," or "incorporated" or the abbreviation c." or "Co". A professional corporation name must contain the
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 off new registered agent and/or the new registered office	
Name of New Registered Agent	
(F	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	
Signature e	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, a 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 = Ch. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each off 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	re, una sai	iy Simith, SV as an Ada.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DIR	Jason Lester Mosier	2181 SE Flagstone Ct
Add			Port St Lucie, FL
X Remove			34952
2) Change			
Add			· · ·
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

(Atta	ending or adding additional Articles, enter change(s) here:  additional sheets, if necessary). (Be specific)
— <del></del> -	
<del></del> -	
<del>.</del>	
_	
If an	mendment provides for an exchange, reclassification, or cancellation of issued shares,
nro	sions for implementing the amendment if not contained in the amendment itself:
<u> </u>	f not applicable, indicate N/A)
	,,,,,
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	, if other than
date this document was signed.	<del>-</del>
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	_
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as (
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareho action was not required.	lder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
July 5, 2019 Dated	
Signature Dong Ronge 2127	
(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 contents.)	
appointed fiduciary by that fiduciary)	7411
Gary Ravenscroft	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<u> </u>