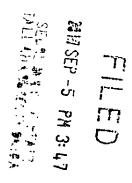
## P07000107688

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
_	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	



700303044337

700303044337 09/05/17--01020--022 \*\*52,50



Anundlecus

SEP 1 4 2017 I ALBRITTON

## COVER LETTER

**TO:** Amendment Section Division of Corporations

WallCo Family NAME OF CORPORATION:	Painting, Inc.
P07000107688 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Cheryl A Wallace	
WallCo Family Painting.	Name of Contact Person Inc.
13325 Egrets Marsh Dr	Firm/ Company
Jacksonville, FL 32224	Address
	City/ State and Zip Code
cheryl.wallace57@yahoo.com	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, p	  case call:  -
Cheryl A Wallace	904 707-9515 at ()
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
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

## Articles of Amendment to Articles of Incorporation of

WallCo Family Painting, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P07000107688 (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: 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. for 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) , Florida New Registered Office Address: (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

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President: V= Vice I Executive Officer: CFO = held. President, Treasurer Changes should be noted a change, Mike Jones leav Mike Jones, V as Remove, Example:	ind/or D if necess ector title resident Chief I Directo in the for yes the co and Sal	irector being ary) e by the first; T = Treasu Financial Off or would be leading many orporation, S ly Smith, SV	g added:  letter of the office title;  rer; S= Secretary; D= Director; TR= Tri  ficer. If an officer/director holds more the  TD.  rer, Currently John Doe is listed as the P  cally Smith is named the V and S. These sl	irector being removed and title, name, and ustee: C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office ST and Mike Jones is listed as the V. There is nould be noted as John Doe, PT as a Change.
X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith	<u> </u> 	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	<u>me</u> 	<u>Addres</u> s
l) Change	V	Jo	hn W. Wallace	13325 Egrets Marsh Dr
X Add		- <del>-</del>		Jacksonville, FL 32224
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				

\_\_\_\_ Remove

E. If amending or adding additional Articles	s enter change(s) here:
(Attach additional sheets, if necessary). (E	Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	<u>                                     </u>
	<u></u>
	<u>  </u>
· · · · · · · · · · · · · · · · · · ·	
F. If an amendment provides for an exchang	e, reclassification, or cancellation of issued shares,
provisions for implementing the amenda	pent if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
	<u> </u>

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does r document's effective date on the Department of	of meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CF	ECK ONE)
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes east for the amendment(s)
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	  dment(s) was/were sufficient for approval
by	
(vo.	ing group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
9/2/2017 Dated	
Signature Cherry	Ra.Wallaco
	dent or other officer – if directors or officers have not been ipporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary	
Cheryl A. V	 Vallace 
	Typed or printed name of person signing)
President	
	(Title of person signing)