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SECRETARY OF STATE

Amend & Mc

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JUL 15 2009

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Rawlins Painting
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Benjamin R Blackwelder Name of Contact Person
Rawlins Painting Firm/Company
4275 Mecca hammat II.
Sanford, Fl. 32773 City/ State and Zip Code
MUFFINDE (to be used for future annual report notification)
For further information concerning this matter, please call: Benyamin Blackwelder at 321 948-3654 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\ \text{Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy} \ (Additional copy is enclosed)\$\$ Certified Copy \ (Additional Copy is enclosed)\$\$
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Clifton Building Tallahassaa, FL 32314 2661 Evecutive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 2, 2009

BENJAMIN R BLACKWELDER RAWLINS PAINTING 4275 MECCA HAMMOCK TRL SANFORD, FL 32773

SUBJECT: RAWLINS PAINTING Ref. Number: P08000085972

We have received your document for RAWLINS PAINTING and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 509A00022845

Articles of Amendment

to

Articles	of	Incorporati	ion

. 0	of
: Kawlins Pain	ting
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Florida Profit Corporation adopts the fo
A. If amending name, enter the new name of	(the corporation:
Rawlins Pain	ting Inc. The ne
abbreviation "Corp.," "Inc.," or Co.," or the	the world "corporation," "company," or "incorporated" or the designation "Corp," "Inc," or "Co". A professional corporation fessional association," or the abbreviation "P.A."
B. Enter new principal office address, if app (Principal office address MUST BE A STREE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	
D. If amending the registered agent and/or r	registered office address in Florida, enter the name of the
new registered agent and/or the new regis	
Name of New Registered Agent:	Michelle Blackwelder
Ĺ	1275 Mecca hammack-trl.
New Registered Office Address:	(Florida street address)
•	Sanford , Florida 32773
	(City) (Zip Code)
Now Davistanad Acamt's Ciomatuma if shancin	ng Dagistanad Agants
New Registered Agent's Signature, if changir I hereby accept the appointment as registered a	ng Kegistereu Ayent; igept. I am familiar with and accept the obligations of the position.
	Wishelle B. Inskirldon
S	Signature of New Registered Agent, if changing
S	ignature of New Registered Agent, if changing

Page 1 of 3

## 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)

Title	Name	<u>Address</u>	Type of Acti
rctary	Michelle Blattwelder	4215 mecca Mmmock tri Santora F132713	_ ဩ Add □ Remove
			☐ Add ☐ Remove
			☐ Add☐ Remove
,			
F. If an amer	ndment provides for an exchange, recla for implementing the amendment if n	assification, or cancellation of issection o	sued shares,
	applicable, indicate N/A)		

Effective date if applicable:  (no more than 90 days after amendment file date)
(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
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 6/23/09
Signature Binju Blanon
(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)
Benjamin Blackwelder  (Pyped or printed name of person signing)
(Typed of printed name of person signing)
Title of person signing)