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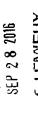


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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	ATION: JOSE VALDEZ P.	AINTING, INC	
DOCUMENT NUMB			
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
;	JOSE VALDEZ		
-	PM 500	Name of Contact Person	n
-		Firm/ Company	
-	,	Address	
-		City/ State and Zip Cod	e
For further information	E-mail address: (to be use concerning this matter, please	sed for future annual report	notification)
JOSE VALDEZ		at (201-2830
Name o	f Contact Person	Area Co	dc & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	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)
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327	Amend Divisio Clifton	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

JOSE VALDEZ PAINTING INC

(Name of Corporation as currently	iled with the Florida Dept.	of State)	
P08000096685			
(Document Number of C	orporation (if known)		1
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	orida Profit Corporation ad	opts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corpora		
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: new registered agent and/or the new registered office address:	s in Florida, enter the nam	e of the	
Name of New Registered Agent			<u> </u>
(Florida stree	address)		
New Registered Office Address:	, 'itv)	Florida	(Zip Code)
	цу		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	h and accept the obligations	of the pos	ition.
			5.9
Signature of New Res	istered Agent, if changing		(C)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	BYRON VALDEZ	20421 NW 22 CT
x Add			MIAMI, FL 33056
Remove			.
2) Change			
Add			
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. ,	ticles, enter change(s) here: (Be specific)
	70
101	

# 74 ti	
	- Water and - Wate
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

9/26/2016	
The date of each amendment(s) adoption: date this document was signed.	, if other than t
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be listed as th
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)	
(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.	
9/26/2016	
Signature Case H. Valley	
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)	
JOSE VALDEZ	
(Typed or printed name of person signing)	
(-)t t	
(Title of person signing)	