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SECRETARY OF STATE
AND ASSESSED FOR THE ASSESSE

C. LEWIS ANG 2 6 2013 EXAMINER

<u>COVER LETTËR</u>

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: FREDHY'S	GOLD PAINTII 19	NG, INC.
	Amendment and fee are su		
_	ondence concerning this ma	_	
	-		. -
_		Fredhy Martin	
	Erad	Name of Contact Person	
_	Fred	lhy's Gold Painti	ng, inc.
	2700	Firm/ Company	.l. T.ul
	3/99	Cedar Hammoo	K 111.
	Cain	Address	0
	Sain	t Cloud, FI 3477	
		City/ State and Zip Cod	e
	fredl	ny12@yahoo.co	m
	E-mail address: (to be u	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call: at (407	, 908-3447
	Contact Person		de & Daytime Telephone Number
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Enclosed is a check for the	ne 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
U ∾ P.O B	ÉAddress ment Section g of Corporations	Amend Divisio Clifton 2661 E	is enclosed) Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

FREDHY'S GOLD PAINTING, INC.

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

P09000008079

SECRETARY OF STATE
TALLAHASSEE FLORIDA

(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

e must be distinguishable and contain the rp.," "Inc.," or Co.," or the designation "(d"chartered," "professional association," or	Corp," "Inc," or "Co".	A profession		
Enter new principal office address, if application of the contract of the cont			· · · · ·	
	<u>—</u>			
	_			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICL	E BOX)			
Mailing address <u>MAY BE A POST OFFICE</u>	<u> </u>			
Mailing address <u>MAY BE A POST OFFICI</u>	<u> </u>			
f amending the registered agent and/or reg	gistered office address in	ı Florida, en	er the nam	e of the
	gistered office address in	ı Florida, en	er the nam	e of the
amending the registered agent and/or reg	gistered office address in ered office address:			e of the
f amending the registered agent and/or reg ew registered agent and/or the new registe	gistered office address in ered office address:			e of the
amending the registered agent and/or regew registered agent and/or the new registe	gistered office address in ered office address:			

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> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	Zeferino B. Flores	4108 Arrow Ridge Pl
Add		· -	Apt. 304
X Remove			Kissimmee, Fl 34741
2) Change	S	Luis Romero	606 Estrada Ln
Add			Kissimmee, Fl 34758
X Remove			was not be with a solid
3) Change	Т	Cristian Montiel	7 Laguna Pointe Way
X			Kissimmee, Fl 34743
Remove			
4) Change	S	Miguel Zamora	9136 Duboi Blvd
X			Orlando, FI 32825
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<mark>amending or adding additiona</mark> tach <i>additional sheets, if necess</i>	ary). (Be specific	;)		
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ovisions for implementing the (if not applicable, indicate N	<u>: amenament it no</u> 74)	t contained in the	amenament itseit:	
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8/20/2013 The date of each amendment(s) adoption: if other than the date this document was signed. 13 AUG 22 PM 4: 05 Effective date if applicable: (no more than 90 days after amendment file date) SECRETARY OF STATE TALLAHASSEE, FLORIDA 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 (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. 8/20/2013 Dated (By a director, president or other officer - if directors or officers have not been Signature selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Fredhy Martinez
(Typed dr printed name of person signing) President.
(Title of person signing)