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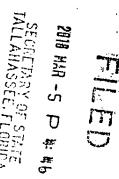
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ASAP Painting As	nd Waterproofing Inc			
DOCUMENT NUM	P09000027717 BER:				
The enclosed Articles	of Amendment and fee are su	abmitted for filing.			
Please return all corre	espondence concerning this ma	atter to the following:			
	Soren Anniko				
		Name of Contact Person			
	ASAP Painting and Waterproofing Inc				
	Firm/ Company				
	8700 Front Beach Road, Uni	(t#15t1			
		Address			
	Panama City Beach, FL 3240	07			
	, , , , , , , , , , , , , , , , , , , ,	City/ State and Zip Code			
sorei	nanniko@hotmail.com				
	E-mail address: (to be us	sed for future annual report notification)			
For further information	on concerning this matter, pleas	se call:			
Soren Anniko		850 625-4265			
Name	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check to	or the following amount made	payable to the Florida Department of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)			
	iling Address	Street Address			
Amendment Section Division of Corporations		Amendment Section			
	Division of Corporations Clifton Building				
Tallahassec, FL 32314		2661 Executive Center Circle			
		Tallahassee, FL 32301			

Articles of Amendment to **Articles of Incorporation** of

ASAP Painting and Waterproofing Inc			
	f Corporation as curre	ntly filed with the Florida De	ept. of State)
P09000027717			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ution "Corp _e " "Inc." or	"Co". A professional corp	
B. Enter new principal office address, i	f applicable:		
(Principal office address <u>MUST BE A ST</u>	<u>"REET ADDRESS"</u>)	155 Fairview Rd	
		Alford, FL 32448	, <u>, , , , , , , , , , , , , , , , , , </u>
C. Enter new mailing address, if applic			
(Mailing address MAY BE A POST C	<u>OFFICE BOX</u>)	D.O. D. 10444	
		P. O. Box 18666	
		Panama City, FL 32417	-8666
D. If amending the registered agent and new registered agent and/or the new	d/or registered office ad registered office addre Soren Anniko	ldress in Florida, enter the n ess:	ame of the
Name of New Registered Agent	155 Fairview Rd		
			11 E 1000 E
	(Florida . Alford	street address)	22.1.10
New Registered Office Address:	Anord		32448 , Florida
		(Cuy)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	/n.	nt: r with and accept the obligation Registered Agent, if changing	AND

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PTD	Soren Anniko	155 Fairview Rd
X Add			Alford, FL 32448
Remove			
a >	CEO	Dale Jr. Gardner	19532 Brandon Rd
2) Change X			Fountain, Fl 32438
Add			
Remove			
3) Change	_		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	(),g,
	We - 1 to
	70 C - 10
18.00	
	2001-000
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A	
18/4	
W W	
	

02/27/2018	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
03/26/2018	
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, thi document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ent(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	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareh action was not required.	older
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	r
02/27/2018	
Dated	
	and the same of th
Signature	
(By a director, president or other officer -if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	court
Soren Anniko	
(Typed or printed name of person signing)	
UTD	
(Title of person signing)	<u></u>