# 110000698

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\*\*43.75

#### **COVER LETTER**

T.O: Affiendment Section Division of Corporations

NAME OF CORPO	RATION:	POWDER COAT SPECIALISTS, INC.
DOCUMENT NUM	BER:	P11000006922
The enclosed Article.	s of Amendment an	d fee are submitted for filing.
Please return all corre	espondence concern	ning this matter to the following:
		CHARLES H. SANFORD
		Name of Contact Person
_	CHARLE	S H. SANFORD LAW OFFICES, P.L.
		Firm/ Company
	300	03 CARDINAL DRIVE, SUITE B
		Address
		VERO BEACH FL 32963
		City/ State and Zip Code
	CHARLESHS	SANFORDLAW@COMCAST.NET
•	E-mail address: (to	o be used for future annual report notification)
For further information	on concerning this n	natter, please call:
CHARL	ES H. SANFORD	at ( 772 ) 492-1695
Name of	Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check f	or the following am	ount made payable to the Florida Department of State:
□ \$35 Filing Fee	✓ \$43.75 Filing Fee & Certificate of Statu	
Mailing Add		Street Address
Amendment S		Amendment Section
Division of Core P.O. Box 632	_	Division of Corporations .
Tallahassee F		Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 26, 2011

CHARLES H. SANFORD CHARLES H. SANFORD LAW OFFICES, PL 3003 CARDINAL DRIVE, SUITE B VERIO BEACH, FL 32963

SUBJECT: POWDER COAT SPECIALISTS, INC.

Ref. Number: P11000006922

We have received your document for POWDER COAT SPECIALISTS, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is T02000000524- PROCOAT.

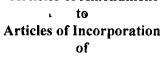
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

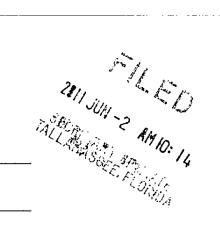
If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert Regulatory Specialist II

Letter Number: 311A00013034

## **Articles of Amendment** to





### POWDER COAT SPECIALISTS, INC.

(	Name of Cor	poration as	currently file	ed with the	e Florida	Dept. of State

1	PΊ	1	n	n	n	n	n	R	9	2	2
				•	u	u	u	u		_	_

(Document Nu	imber of Corporat	ion (if known)
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		tes, this Florida Profit Corporation adopts the follo
A. If amending name, enter the new name	of the corporatio	on:
PR	O-COAT, INC.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	ne designation "C	coration," "company," or "incorporated" or the corp," "Inc," or "Co". A professional corporation ation," or the abbreviation "P.A."
B. Enter new principal office address, if ap		7384 COMMERCIAL CIRCLE
Principal office address <u>MUST BE A STRE.</u>	ET ADDRESS)	FT. PIERCE FL 34951
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		7384 COMMERCIAL CIRCLE
		FT. PIERCE FL 34951
D. If amending the registered agent and/or new registered agent and/or the new reg		
Name of New Registered Agent:	CHARLES H	. SANFORD
New Registered Office Address:		NAL DRIVE, SUITE B ida street address)
	VERO BEAC	, i torida <u></u>
	(City)	(Zip Code)
New Registered Agent's Signature, if chang hereby accept the appointment as registered		igent:  iliar with and accept the obligations of the position.
	Signature of Mou	Registered Agent, if changing
•	Signature Of New	Registered Agent, if changing

# 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	<u>Name</u>	Address	Type of Action
PRES.	HARRY DOSBERG	7399 SE 12TH CIRCLE OCALA FL 34480	☐ Add ☐ Remove
PRES.	CHRISTINE SCHROEDER	7384 COMMERCIAL CIRCLE FT. PIERCE FL 34951	_ ☑ Add _ ☐ Remove
	<del></del>		Add Remove
	ng or adding additional Articles, ente ditional sheets, if necessary). (Be spec		
provision	endment provides for an exchange, rens for implementing the amendment if applicable, indicate N/A)	classification, or cancellation of iss f not contained in the amendment i	ued shares, tself:

The date of each amendment	t(s) adoption: MAY 16, 2011
•	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed 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	.,,
<b>,</b>	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	CHRISTINE SCHROEDER
	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)