## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

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Account Number: I20170000070 Phone

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN UNIVERSAL DECO PAINTING INC

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(FAX)

TO: Amendment Section

## COVER LETTER

Division of Corp	orations			
NAME OF CORPOR	RATION: UNIVERSAL DE	CO PAINTING INC		
DOCUMENT NUMI	D11000009100			
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		
	spondence concerning this ma			
		,	•	
	LUCIA ESTRELLA			
		Name of Contact Person	1	
	CONSTRUCTION & ENGI	NEERING SCHOOL		
	Firm/ Company			
	8300 WEST FLAGLER ST			
	Address			
	MIAMI, FL 33144			
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	В	
TIC	IA PETRELIA ARELI COLT	TI NITT		
	IAESTRELLA@BELLSOUT	sed for future annual report		
	E-mail address: (to be u	sed for infare minual report	nouncation)	
For further information	n concerning this matter, plea	sc call:		
LUCIA ESTRELLA		at ( 305	226-8727	
Name (	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	urtment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fifing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Pt. 32314		Street	Address	
		Amend	ment Section	
			n of Corporations	
		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

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## Articles of Amendment to Articles of Incorporation of

2019 SEP 27

UNIVERSAL DECO PAINTING INC			
(Name of Corpor	stion as currently	y filed with the Florida Dept. of State)	
P11000098199			
(Doc	cument Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this I	Florida Profit Corporation adopts the follow	ing ame
A. If amending name, enter the new name of the	corporation:		
			The
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Coward "chartered," "professional association," or t	orp," "Inc," or "(	Co". A professional corporation name mus	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u> )		
D. If amending the registered agent and/or regis	stered office addr	ess in Florida, enter the name of the	
new registered agent and/or the new register			
Name of New Registered Agent			
	(Florida stre	et address)	_
New Registered Office Address:		, Florida	
	(	(City) (Zi	p Code)
<b>1</b>			
New Resistered Agent's Signature, if changing R	lagistared Ament		
I hereby accept the appointment as registered agen			7.
Si	enature of New Re	egistered Agent, if changing	<del>_</del>

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, 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; GI Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Doe			
X Remove	Y	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	_Title	Name	Address		
1) Change	D	MADRID, FRANCISCO D	9301 NW 114 LANE		
Add			HIALEAH GARDENS, FL		
X Remove			33018		
2) Change	D	FUENTES MARQUEZ, LEANCI	9301 NW 114 LANE		
X Add			HIALEAH GARDENS, FL		
Remove			33018		
3) Change					
Add			· 		
Remove					
4) Change		<u> </u>			
Add	•				
Remove					
5) Change					
Add					
Remove					
δ) Change					
Add					
Remove		·			

(FAX)

E.	If amending or additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
	<del></del>
	<del></del>
F.	If an amendment provides for an exchange, reclassification, or cancellation of issued abures.  provisions for implementing the amendment if not contained in the amendment itself:
	(If not applicable, indicate N/A)
N/	A
_	

-- --

	09/2	26/2019	
The date of each amendmen			, if ot
date this document was signed	•		
	09/26/2019		
Effective date if applicable:			
		(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t		t meet the applicable statutory filing requirements, this ditate's records.	ate will not be l
Adoption of Amendment(s)	( <u>CHE</u>	CK ONE)	
The amendment(s) was/we by the shareholders was/w		hareholders. The number of votes cast for the amendment proval.	(s)
must be separately provid	ed for each voting g	shareholders through voting groups. The following statem group entitled to vote separately on the amendment(s):	nent
I de number of vote	cast for the americ	linent(s) was/were sufficient for approval	
. by		<u>.</u> .	
	(votln	ng group)	
action was not required.		oard of directors without shareholder action and sharehold accorporators without shareholder action and shareholder	l <del>द</del> ा
09/26 Dated Signature	/2019		
(E S4		ent or other officer — if directors or officers have not been porator — if in the hands of a receiver, trustee, or other coupy that fiduciary)	
	JOSE M CAS	STILLO	
		yped or printed name of person signing)	
	PRESIDENT		
		(Title of person signing)	