P12000002105

(Requestor's Name)	
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7

Office Use Only



000236021130

06/14/12--01010--019 **35.00

N



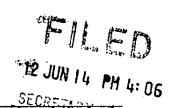
JUN 14 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: A GOOD SI	UN PAINTING I	NC
DOCUMENT NUMBER: _F	71200000280) 	
The enclosed Articles of Ame			
Please return all corresponder	ice concerning this matt	ter to the following:	,
WIL	LIAM FOX		
va Tible all little and		Name of Contact Person	
ACC	URATE TAX 8	& ACCTING OF	CENTRAL FLORIDA
		Firm/ Company	
117	99 SE US HW	/Y 441	
<u></u>	-	Address	
BEL	LEVIEW, FL	34420	
	<u> </u>	City/ State and Zip Code)
THEGO	ODSUN@YM	MAIL COM	
		ed for future annual report	notification)
	,	·	
For further information conce	rning this matter, please	e call:	
WILLIAM FOX		at (352	, 245-9830
Name of Cont	act Person		de & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made p	ayable to the Florida Depa	rtment of State:
	\$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building
		2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation



A GOOD SUN PAINTING INC

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

P12000002805

nt(s) to

(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amends to Articles of Incorporation:	ıer
A. If amending name, enter the new name of the corporation: THE GOOD SUN PAINTING INC The na	'h'
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain t word "chartered," "professional association," or the abbreviation "P.A."	m he
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 in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	

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)

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>	Address
1) Change Add Remove			
2) Change Add Remove			
Change Add Remove	-		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

f amending or adding additional Artic attach additional sheets, if necessary).	(Be specific)	
		•
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
	·	

The date of each amendment(s) adoption: FEBRUARY 8, 2012
Effective date if applicable:
(no more than 90 days after amendment file date)
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
☐ 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.
Dated FEBRUARY 8, 2012
Signature (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)
JOHN S VITALE
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)