P12000015093

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Amend

APR 2 5 2017

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Paint Solu	utions & Repair, Ir	10
DOCUMENT NUMBER: P120000150	93	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Klaus Christoph	er Sweat	
	Name of Contact Person	1
Paint Solutions	& Repair, Inc	
	Firm/ Company	
17326 SW 75th	Avenue	\$1
	Address	
Archer, FL 3261	8	
	City/ State and Zip'Cod	e
chris.paintsolutions(@gmail.com	
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, ple	ease call:	
Chris Sweat	at (352	327-5553
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Depa	urtment of State:
■ \$35 Filing Fee	□\$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 2661 E	Address ment Section n of Corporations Building xecutive Center Circle

Articles of Amendment to **Articles of Incorporation**

FILED 12 APR 24 PM 12: 13

Paint Solutions & Repair, Inc.

SECRETARY SESTATE

(Name of Corporation as	currently filed with the I	Florida Dept. of State)	LAHASSEE PLORIDA
P12000015093			
(Documen	t Number of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ad	opts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
nla			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate	ation "Corp," "Inc," or '	"Co". A professional corporal	
B. Enter new principal office address, (Principal office address MUST BE A ST		nla	
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST (</u>		nja	
D. If amending the registered agent annew registered agent and/or the new Name of New Registered Agent	v registered office address Klaus Christoph	s: er Sweat	e of the
		enue Archer, FL 32618	
		reet address)	
New Registered Office Address:	(City)	Florida_	(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.

Klaus Unistuplin Swit
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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	P	Rhonda K. Sweat	17326 SW 75th Avenue Archer, FL 32618
2) Change × Add Remove	Р	Klaus Christopher Sweat	17326 SW 75th Avenue Archer, FL 32618
3) Change Add Remove	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>
4) Change Add Remove	 -		
5) Change Add Remove			
6) Change Add Remove	***************************************		

mending or adding additional Articles, enter change(s) ach additional sheets, if necessary). (Be specific)	·	
nla		
		
	-	
		<u></u>
		-
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	₹.	
n amendment provides for an exchange, reclassification exisions for implementing the amendment if not contain (if not applicable, indicate N/A)	n, or cancellation of issued shares, ned in the amendment itself:	
n/a		
	1	
	* *	

The date of each amendment(s) a	doption: 4/23/2012	<u>.</u>	
Effective date <u>if applicable</u> :			
	(no more than 90 days after amendment file date)		
			15.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	.	. t
The amendment(s) was/were adby the shareholders was/were st		umber of votes of	east for the amendment(s)
The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders throu each voting group entitled to vo		
"The number of votes cast	for the amendment(s) was/were	sufficient for app	proval
by	(voting group)		**
	(voting group)		
The amendment(s) was/were adaction was not required. The amendment(s) was/were adaction was not required.			
Dated 4-23-1	2		
Signature	Laus Lhustophu Suk lirector, president or other office	<u>+</u>	*.
selecte	lirector, president or other officered, by an incorporator — if in the lated fiduciary by that fiduciary)		
	Klaus Christopher	Sweat	
	(Typed or printed na	me of person sig	ning)
	President		
	(Title of person s	igning)	