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| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECKETARY OF STATE
TALLAHASSEE PLOSIES

COVER LETTER

TO: Amendment Section Division of Corporations

| | 1BER: P12000017944 | PAINTING INC | |
|--|--|---|--|
| | | | |
| The enclosed Article | s of Amendment and fee are su | ibmitted for filing. | |
| Please return all corr | respondence concerning this ma | atter to the following: | |
| | MIGUEL LOPEZ | | |
| | | Name of Contact Perso | n |
| | | Firm/ Company | · |
| | 1296 N MILITARY TRAIL | . , | |
| | | Address | , |
| | WEST PALM BEACH FL 3 | 3409 | |
| | | City/ State and Zip Cod | le |
| | E-mail address: (to be us | sed for future annual report | notification) |
| | on concerning this matter, pleas | se call: | |
| MIGUEL LOPEZ | on concerning this matter, pleas | se call:at (| 900-0325 |
| MIGUEL LOPEZ | on concerning this matter, pleas | se call: at (305 Area Co | 900-0325 de & Daytime Telephone Number |
| MIGUEL LOPEZ Name Enclosed is a check to | on concerning this matter, please of Contact Person | se call: at (305 Area Co |) 900-0325 ode & Daytime Telephone Number artment of State: |
| MIGUEL LOPEZ Name Enclosed is a check to see the second s | on concerning this matter, please of Contact Person for the following amount made \$\B \text{S}\delta \text{3.75 Filing Fee & Certificate of Status}\$ | at (305 Area Co payable to the Florida Depayable to the Florida Depayable for the Florida Depayable Certified Copy (Additional copy is enclosed) Street | 900-0325 ode & Daytime Telephone Number artment of State: □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| MIGUEL LOPEZ Name Inclosed is a check to the second secon | on concerning this matter, please of Contact Person for the following amount made \$\B\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | at (305 Area Co payable to the Florida Depi S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Street Amend | 900-0325 ode & Daytime Telephone Number artment of State: U\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| MIGUEL LOPEZ Name Inclosed is a check to \$35 Filing Fee Man Dir P.C | on concerning this matter, please of Contact Person for the following amount made \$\B\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | at (305 Area Copy and Area Copy (Additional copy is enclosed) Street Amend Division Cliftor | 900-0325 Jode & Daytime Telephone Number artment of State: S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) Address Iment Section |

Articles of Amendment to Articles of Incorporation of

MIGUEL LOPEZ PAINTING INC

| \ <u></u> | of Corporation as curren | itly filed with the Florida Dept. of State | <u>:</u>) | |
|--|---------------------------------------|--|--------------------|--------------|
| P12000017944 | | | | |
| | (Document Number | of Corporation (if known) | | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | 1006, Florida Statutes, thi | is Florida Profit Corporation adopts the | following amendme | ent(s) to |
| A. If amending name, enter the new n. | ame of the corporation: | | | |
| N/A | | | The new | Ų. |
| | nation "Corp," "Inc," or | ion," "company," or "incorporated" o "Co". A professional corporation nam "P.A." | r the abbreviation | 1 |
| B. Enter new principal office address, if applicable: | | N/A | | |
| (Principal office address MUST BE A S | | | _ | |
| | | | | |
| | | | | |
| C. Enter new mailing address, if appl | icable: | | To at | |
| (Mailing address MAY BE A POST | OFFICE BOX) | N/A | 26 7 | |
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| | | | 92 m 2 | - |
| | | | THE COLUMN | LI. |
| D. If amending the registered agent ar | | | <u>न</u> ्य 🔀 | O |
| new registered agent and/or the ne- | | <u> </u> | 25 F | |
| Name of New Registered Agent | N/A | | 22 DA | |
| | N/A | | | |
| | (Florida s | street address) | | |
| New Registered Office Address: | N/A | Eleviste | | |
| Sen Register Office Students. | · · · · · · · · · · · · · · · · · · · | (City) , Florida_ | (Zip Code) | |
| | | | | |
| | | | | |
| New Registered Agent's Signature, if c | | <mark>11:</mark> r with and accept the obligations of the pe | *.* | |
| r nevery accept the appointment as regist | erea agent 1 am jamitai | r with and accept the obligations of the pe | osition. | |
| 1.1. | 12 | | | |
| 1/40 | | | | |

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 | $\underline{\mathbf{V}}$ | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | T` | FIDELINO LOPEZ BARRIOS | 4741 N AUSTRALIAN AVE APT |
| X Add | | | WEST PALM BEACH FL 33407 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | - | - |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment isself: (if not applicable, indicate N/4) | | rticles, enter change(s) here: . (Be specific) |
|--|--------------------------------------|--|
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | Λ | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | |
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| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | If an amendment provides for an excl | change reclassification or cancellation of issued charge |
| (if not applicable, indicate N/A) | provisions for implementing the ame | endment if not contained in the amendment itself: |
| | (if not applicable, indicate N/A) | |
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| | 08/15/2017 | |
|---|---|-----------------------------------|
| The date of each amendment(s date this document was signed. |) adoption: | , if other than the |
| | 8/15/2017 | |
| Effective date if applicable: _ | (no more than 90) days after amendment file date) | |
| Note: If the date inserted in the | is block does not meet the applicable statutory filing requirements, the Department of State's records. | is date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amende sufficient for approval. | nent(s) |
| | approved by the shareholders through voting groups. The following sta- for each voting group entitled to vote separately on the amendment(s) | |
| "The number of votes of | ast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| ■ The amendment(s) was/were action was not required. | adopted by the board of directors without shareholder action and share | holder |
| ☐ The amendment(s) was/were action was not required. | adopted by the incorporators without shareholder action and sharehold | er |
| 08/15/20 | 017 | |
| DatedSignature | Hul 45 | |
| (By sele | a director, president or other officer – if directors or officers have not leted, by an incorporator – if in the hands of a receiver, trustee, or other ointed fiduciary by that fiduciary) | |
| | MIGUEL LOPEZ | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT AND REGISTERED AGENT | |
| | (Title of person signing) | |