# P12000069847

(Re	questor's Name)	•
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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Amend

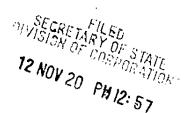
NOV 2 7 2012 T. BROWN

#### **COVER LETTER**

**TO:** Amendment Section . Division of Corporations

NAME OF CORPO	RATION: PATINO FF	RAMING OF SW	FL CORP
DOCUMENT NUM	BER: P1200006984	7	
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	·
	SOCORRO PAT	INO	
		Name of Contact Persor	1
	PATINO FRAMIN	IG OF SW FL C	ORP
		Firm/ Company	
	1002 SAN REMO	AVE	
		Address	
	NAPLES FL 3410	)4 US	
		City/ State and Zip Code	e
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
SOCORRO	PATINO	at (210	, 237 5711
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$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)
Ms	niling Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314			Executive Center Circle
		Tallah:	assee, FL 32301

#### Articles of Amendment to Articles of Incorporation of



### PATINO FRAMING OF SW FL CORP

(Name of Corporation as currently	filed with the Flori	da Dept. of State)		
P12000069847				
(Document Number	of Corporation (if know	own)		•
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this <i>Flor</i>	rida Profit Corporation ado	pts the following	g amendment(s) to
A. If amending name, enter the new name of the	corporation:			
				_The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co. word "chartered," "professional association," or the	orp," "Inc," or "Co"	'. A professional corporati	ated" or the al ion name must c	bbreviation contain the
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET AL				
	-			-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u> )			-
	-			-
D. If amending the registered agent and/or registered agent and/or the new registered		in Florida, enter the name	e of the	
Name of New Registered Agent	<del></del>			
	(Florida street d	nddress)		
New Registered Office Address:		, Florida		_
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	Registered Agent: nt. I am familiar with	and accept the obligations	of the position.	
	•			
Signature of	f New Registered Age.	nt, 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> 1.4</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	e e
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	VP	VIOLETA M. Palino	
Add			
Remove			
2) Change			
Add			
Remove			·
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
0 0			-
6) Change		<u> </u>	
Add			
Damaua			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)
PLEASE CHANGE VP NAME TO VIOLETA M PATINO
WICH IS VIOLETA'S MARRIED NAME
,
· · · · · · · · · · · · · · · · · · ·
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment	t(s) adoption: 10/18/2012
Effective date if applicable:	10/18/2012
, ,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/wei by the shareholders was/wei	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	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(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
<sub>Dated</sub> 10/	18/2012
	$\mathcal{O}$
Signature—	TOCOPULO /ATINO
(I s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
	SOCORRO PATINO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)