## P12000099996

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SECRETARY OF STATE TIVISION OF CORPORATION

America

JAN 1 4 2013

T. BROWN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ALL SAINT PAINTING & REMOBELING INC.  DOCUMENT NUMBER: P12000099986				
The enclosed Articles of Amendment and fee are submitted for filing.				
•				
Please return all correspondence concerning this matter to the following:				
TAMES Socrentino  Name of Contact Person				
Firm/ Company				
4925 SANDER BAY DE				
Address				
H925 SANDYA BAY DY  Address  NARES : FL 34109  City/ State and Zip Code				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
<del></del> .				
For further information concerning this matter, please call:				
- 5 Samuel on 561 305 16487				
Name of Contact Person at (561) 305 6487  Area Code & Daytime Telephone Number				
·				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status  (Additional copy is enclosed)  Certificate of Status  Certified Copy  (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301				

## **Articles of Amendment**



A	of
ALL SAINTS PAIR (Name of Corporation as currently file	
	2001
P 120 000 99 (Document Number of 0	Tob
(Document Number of	poranon (n known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the cor	pration:
POINT ABOVE PO	NTING & REMODELING IN The new
name must be distinguishable and contain the word	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	4925 SANDRA BAY DR
(Mailing dadress MAY BE A POST OFFICE BOX	
	NAPLES FL 34109
D. If amending the registered agent and/or registere	office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	ered 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 <math>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				
2) Change				
Add				
Remove			4.	
3 ) Change			* ***	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

tach additional sheets, if necessary,	). (Be specific)			
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				100
	•			
an amendment provides for an ex	change, reclassif	ication, or cancel	lation of issued sh	ares.
rovisions for implementing the ar	mendment if not o	contained in the a	mendment itself:	
(if not applicable, indicate N/A)				
	-		•	
				····
And the second s				
4.				
			444-9; <u></u>	

The date of each amendment(s) adoption	n: JANUARY 1, 2013
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) nt for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	e amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/were adopted to action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated JANUAR	<u>248,2013</u>
Signature (By a directo selected, by a	r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
	TAMES Sorrantino (Typed or printed name of person signing)
	(Typed of printed name of person signing)
	(Title of person signing)