913000015753

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

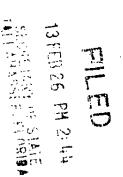
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FEB 2 8 2013

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: STYLOS	COLORS GENE	RAL SERVICES
DOCUMENT NUMBER: P13000015	753	
The enclosed Articles of Amendment and fee ar		
Please return all correspondence concerning this	matter to the following:	
OLGA HERNA	NEZ	
	Name of Contact Persor	1
	Firm/ Company	
PO BOX 65086	33	
	Address	
MIAMI, FL 331	85	
	City/ State and Zip Code	2
olga@Itaxprofessi		
E-mail address: (to b	be used for future annual report	notification)
For further information concerning this matter, p	olease call:	
olga hernandez	at (786	, 422-4309
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Depa	urtment of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Statu		□\$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 on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation

STYLOS COLORS GENERAL SERIVCES CORP

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

P13000015753

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the STYLOS COLORS GENERAL	
	word "corporation," "company," or "incorporated" or the abbreviation Corp," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>
D. If amending the registered agent and/or reg new registered agent and/or the new registe	gistered office address in Florida, enter the name of the ered office address:
Name of New Registered Agent	
name of her negmered agent	
	(Florida street address)
	(Florida street address), Florida (City) (Zip Code)

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			-
Remove			
Kemove			
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and and and itself:
(if not applicable, indicate N/A)	manient is not contained in the amendment risers.

The date of each amendment(s) adoption: 02[22[2013	
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required. The amendment(s) was/were ad	lopted by the board of directors without shareholder action and shareholder lopted by the incorporators without shareholder action and shareholder
action was not required.	
_{Dated} 02 [22	[2013
	That the
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	GASTON NICOLA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)