P13000040026

(Requ	uestor's Name)	
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Custom Canvas By Tina **DOCUMENT NUMBER:** P13000040026 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tina Vasile Name of Contact Person Custom Canvas By Tina, Inc. Firm/ Company 113 S. Miramar Avenue Indialantic, FL. 32903 City/ State and Zip Code canvasbytina@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tina Vasile at (321) 536-8747 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section **Amendment Section Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

	•
Articles of Am to	rporation prida Dept. of State)
Articles of Inco	rporation
of	
Custom Canvas By Tina, Inc.	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
P13000040026	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Ivrida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation,	The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	113 S. Miramar Avenue
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Indialantic, Fl. 32903
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	113 S. Miramar Avenue
	Indialantic, Fl. 32903
	110000
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Processor Alama	
Name of New Registered Agent NA	
(Florida stree	of address)
	,
New Registered Office Address: N/A (City)	, Florida (Zip Code)
(City)	(Esp 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.

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	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	[.	Address	
1) Change	_====			MA	
Add					
Remove					
2) Change			NA		
Add					
Remove			41/.		
3) Change	 		NA		
Add					
Remove				 	
4) Change			NA		
Add					
Remove					
5) Change		 	N/A		
Add			,		
Remove					
6) Change			NA		
Add			/	 	
R <i>e</i> move					

N/A	al sheets, if necessary). (Be specific)	
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f		
provisions for	ent provides for an exchange, reclassification, or can implementing the amendment if not contained in th	e amendment itself:
(if not app	olicable, indicate N/A)	
_/V //	<u>K</u>	· · · · · · · · · · · · · · · · · · ·
	•	
ℓ		
<i>(</i>		

The date of each amendment(s)	adoption: 09/01/2013	, if other than th
date this document was signed. Effective date if applicable:	9/01/2013	
mappineasie.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 09/1	7/2013	
Signature	Ina Val	
selec	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)	
	Tina Vasile	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	