P13000058818

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zipir Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FILING CANCELLED RETURNED CHECK

09/26/16--01041--011 **\$2.50

2016 SEP 26 PM 2: 05

SEP 3 0 2016

C LEWIS

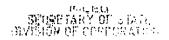
COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOI	RATION: SUNSHINE STAT	E COATING, INC.			
DOCUMENT NUMI					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	MICKEL B. CASTRO				
		Name of Contact Person			
	SUNSHINE STATE COATI	NG, INC.			
		Firm/ Company			
	639 ARROW LANE				
		Address			
	KISSIMMEE FLORIDA 34746				
		City/ State and Zip Code	,		
MICI	KEL@SUNSHINESTATECO	ATING COM			
		sed for future annual report	notification)		
	2 11411 4441455. (10 00 42	ou for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
MICKEL CASTRO		at (780-8883		
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment 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)		
Mailing Address Amendment Section Division of Corporations		Amend	Address ment Section		
	Box 6327	Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301



FILING CANCELLED Articles of Amendment to RETURNED CHECK Articles of Incorporation

2016 SEP 26 PM 2: 05

	orporation as curren	ntly filed with the Florida Dept. of State	
SUNSHINE STATE COATING, INC		3000058818	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new na	ame of the corporation:		
	ation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		1022 WEST MICHIGAN STREET	
		ORLANDO, FLORIDA 32805	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		639 ARROW LANE	
		KISSIMMEE. FLORIDA 34746	
 If amending the registered agent an new registered agent and/or the nev 		dress in Florida, enter the name of the	
MICKEL BRIEN		RO	
Name of New Registered Agent	· ·		
Name of New Registered Agent	639 ARROW LANE		
Name of New Registered Agent	639 ARROW LANE	street address)	
Name of New Registered Agent New Registered Office Address:	639 ARROW LANE	street address) Florida 34746	

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	FII ING	CANCELLED	
X Remove	<u>v</u>	Mike Jones		RETURNED CHECK	
X Add	<u>sv</u>	Sally Smith	TCT CTC		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) X Change	VS	MICKEL CA	STRO	639 ARROW LANE	
Add				KISSIMMEE, FLORIDA 34746	
Remove				······································	
2) Change	РТ	CARLOS CA	STRO	639 ARROW LANE	
X Add				KISSIMMEE FLORIDA 34746	
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove.					
5) Change		<u> </u>			
Add					
Remove					
6) Change	<u> </u>				
Add					
Pamoua					

	(Be specific)
	FILING CANCELLED
	RETURNED CHECK
,	
•	
	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an angel in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and and an angular indicated in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and and an angel in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

DIVISION OF CORPORATION

The date of each amendment(s) adoption:	2016 SEP 2C Afforder than the
date this document was signed.	2016 SEP 26, Appther than the
Effective date <u>if applicable</u> :	
(no more than s	90 days after amendment file date)
Note: If the date inserted in this block does not meet the appli document's effective date on the Department of State's records.	cable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	ne number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/we	ere sufficient for approval
by(voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors action was not required.	
The amendment(s) was/were adopted by the incorporators wit action was not required.	hout shareholder action and shareholder
07/08/2016	FILING CANCELLED
Dated	RETURNED CHECK
Signature Lide 3 &	bath
	icer – if directors or officers have not been he hands of a receiver, trustee, or other court h
MICKEL BRIEN CASTRO	
(Typed or printed	name of person signing)
VS	
(Title	of person signing)