P13000061739

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| PICK-UP | . WAIT | MAIL |
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| Certified Copies | _ Certificate: | s of Status |
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SECRETARY OF STATE (

C. LEWIS AUG 1 2 2013 EXAMINER

COVER LETTER

| TO: Amendment Section Division of Corporations | | | |
|---|--|--|--|
| NAME OF CORPORATION: STIWELL PAINT & Trim Inc | | | |
| DOCUMENT NUMBER: P130000101739 | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | |
| Gayge Stiwell Name of Contact Person | | | |
| Stilvell Paint and Trim Inc Firm/ Company | | | |
| 2017 Dawn Heights Drive | | | |
| Lakeland, FL 33801 | | | |
| City/ State and Zip Code | | | |
| E-mail address: (to be used for future annual report notification) | | | |
| 2.5 m. address. (to be used to fatale almost report normeation) | | | |
| For further information concerning this matter, please call: | | | |
| MEAGAN JMCS at (121) L014-1799 Name of Contact Person Area Code & Daytime Telephone Number | | | |
| Name of Contact Person 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 Certified Copy Certified Copy (Additional Copy (Additi | | | |

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

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Articles of Amendment to Articles of Incorporation

| | | - | | |
|-----------------------|---|------|------|-----------|
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| SECRETAR TALLAHASS | Y | OF S | STAT | TE IDA |

| · ·· | of | ALLAHASSEE, FLORIDA |
|--|--|--|
| Stilvell Paint & Trim | WLC | FLORIDA |
| (Name of Corporation as currently filed | d with the Florida Dept. of State) | |
| P130000101739 | . ((1) | |
| (Document Number of Co | orporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation: | tatutes, this Florida Profit Corporation add | opts the following amendment(s) to |
| A. If amending name, enter the new name of the corp | oration: | |
| NA | | The new |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab | "Inc," or "Co". A professional corporat | ated" or the abbreviation ion name must contain the |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR. | ESS) | |
| C. Enter new mailing address, if applicable: | -110 | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | <u> </u> | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of | | e of the |
| Name of New Registered Agent NA | | |
| - - | (Florida street address) | |
| New Registered Office Address: N | , Florida | |
| | (City) | (Zip Code) |
| | | |
| New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I described the second | | of the position. |
| مالم | | |
| 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 D | <u>oe</u> | |
|----------------------------|-----------|---------|-------------------|---------------------------------------|
| X Remove | <u>v</u> | Mike J | <u>ones</u> | |
| X Add | <u>sv</u> | Sally S | <u>mith</u> | |
| Type of Action (Check One) | Title | | <u>Name</u> | Address |
| 1) Change | NP | _ | Garald L Stilnell | 2017 Dawn Heights Dr. Laveland, PL |
| Add Remove | | | | 33801 PC |
| 2) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| -4) Change | | _ | | · |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | <u></u> | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |
|--|
| Article IV |
| The current number of shares authorized to be |
| issued by the corporation should be changed from |
| 1 share to 100 shares. Each share at a rate of |
| \$0.001 per snare. |
| The snares should be issued divided as follower |
| President owner George Robort Stillell: 80 shares |
| vice president Garald Lester Stilhell: 10 shares |
| Director Scoretary Meagan Louthn Jones: 10 shares |
| |
| |
| |
| |
| |
| |
| 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) |
| Issued shares shall be amended and reassigned |
| as stated above. |
| |
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| The date of each amendment(s) adoption: | TALLAHASSEE, FLORIE, if other than the |
|---|---|
| date this document was signed. | TEOMASSEE. FLORIDA |
| Effective date if applicable: AUJUST 5th, 2013 (no more than 90 da | tys after amendment file date) |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The nur by the shareholders was/were sufficient for approval. | nber of votes cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote | |
| "The number of votes cast for the amendment(s) was/were su | fficient for approval |
| by | ,, |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors with action was not required. | nout shareholder action and shareholder |
| ☐ The amendment(s) was/were adopted by the incorporators without action was not required. | shareholder action and shareholder |
| Dated 08 05 13 | |
| Signature Lings At M (By a director, president or other officer - | if disasters on a Cinna have not been |
| selected, by an incorporator – if in the ha | |
| appointed fiduciary by that fiduciary) | |
| CONTER THIN | ed name of person signing) |
| President major | The Shareholder I person signing) |