# 714000004922

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C. CARROTHER

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ULTIMATE FINISHES CORP					
DOCUMENT NUMBER: P14000004922					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
REGINA MEDEIROS					
CSG - CAPITAL SERVICE GROUP INC					
Firm/ Company 446 W HILLSBORO BLVD					
DEERFIELD BEACH, FL 33441					
City/ State and Zip Code					
REGINA@THEWAYGROUP.BIZ  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
REGINA MEDEIROS at (954 ) 427-4770					
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 (Additional copy is enclosed)  □ \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)  □ \$43.75 Filing Fee & 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 Articles of Incorporation** of

## **ULTIMATE FINISHES CORP**

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

ent(s) to

		والمناب المناب ا
(Document Number of	of Corporation (if known)	
arsuant to the provisions of section 607.1006, Florid Articles of Incorporation:	da Statutes, this <i>Florida Profit C</i>	Corporation adopts the following am
If amending name, enter the new name of the	corporation:	
		The
me must be distinguishable and contain the wo Corp.," "Inc.," or Co.," or the designation "Cor ord "chartered," "professional association," or th	p," "Inc," or "Co". A profess	
Enter new principal office address, if applicab	<u></u>	
rincipal office address <u>MUST BE A STREET AD</u>	DRESS )	
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u>OX</u> )	
	<del></del>	<del> </del>
	<del> </del>	<del></del>
If amending the registered agent and/or regist- new registered agent and/or the new registered		enter the name of the
•	·	
Name of New Registered Agent		
	(Florida street address)	<del></del>
	(Florida street address)	
New Registered Office Address:	(Florida street address) (City)	, Florida(Zip Code)

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.

X Change	PT	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>	<u>Addres</u> s
1) Change	VP	MARILZA F. MARTINS	8462 DYNASTY DR
Add			BOCA RATON, FL 33433
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Lange			
Add			
Remove			

amending or adding additional Artic ttach additional sheets, if necessary).	
	·····
	<del></del>
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adopt date this document was signed.	otion: 11/05/2014	, if other than the
_		
Effective date if applicable:	(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 suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated 11/05/201	4	
(By a dire	ctor, president or other officer – if directors or officers have not been	<del></del>
	by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
Q	UINCY DASILVA	
	(Typed or printed name of person signing)	
P	RESIDENT	
<del></del>	(Title of person signing)	<del></del>