P14000016705

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: 5 DoKF With NANKY Who Carected PRGE 4 of 4 of the Carment. 11-8-16				

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COVER LETTER

Division of Corporations A & V PAINTING SERVICES INC NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALEJANDR VALERIO Name of Contact Person ALEJANDRO VALERIO Firm/ Company 18350 USEPPA RD Address FORT MYERS FL 33967 City/ State and Zip Code CGPSSERVICES@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ALEJANDRO VALERIO 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 enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

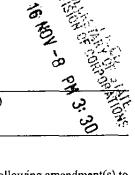
Street Address

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

16 NOV -8 PM 3: 30

Articles of Amendment **Articles of Incorporation**





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

P14000016705

ent(s) to

	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation add	pts the following amendme	
A. If amending name, enter the new n	ame of the corporation:			
MASTERCOAT PAINTING INC			The nev	
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporat	ated" or the abbreviation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		18350 USEPPA RD		
		FORT MYERS FL 33967		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		18350 USEPPA RD		
		FORT MYERS FL 33967		
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent		<u>s:</u>	of the	
Name of New Registered Agent	18350 USEPPA RD			
		reet address)	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	FORT MYERS	,]	Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			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 Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	ones .		
X Add	<u>sv</u>	Sally Sr	nith		
Type of Action (Check One)	Title	•	Name		Address
1) Change			•	-	·
Add					
Remove					
2) Change		_		_	
Add					
Remove					
3)Change				-	
Add					
Remove					
4) Change		_		_	
Add					
Remove					•
5) Change		_		_	
Add					
Remove					
6) Change				.	
Add					
Remove					

(Attach additional sheets, if necessary). (Be specific) PLEASE CHANGE THE NAME CORPORATION THE NEW NAME IS (MASTERCOAT PAINTING INC) THANK YOU
THANK YOU
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)
·

ms to the second	11/01/2016	
The date of each amendment(s) addate this document was signed.	option:	, if other than th
· · · · · · · · · · · · · · · · · · ·	1/2016	
Effective date if applicable:	<u> </u>	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dapartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(sfficient for approval.	3)
	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by ONE HUNDRED	"	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholde pted by the incorporators without shareholder action and shareholder	r
•		
11/01/2016 Dated_		
	10.	
Signature		
	rector, president or other officer - if directors or officers have not been	
	l, by an incorporator if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
аррони	a nationary by that nationary)	
	ALEJANDRO VALERIO	
•	(Typed or printed name of person signing)	
1	PRESIDENT	•
-	(Title of person signing)	