P14000027856

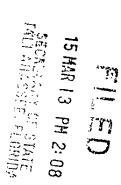
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

•			5	5 (c
NAME OF CORPOR	ATION: PC AVILA P	AINTING CORPO	DRATION	
DOCUMENT NUMB	ER: P14000027	856		
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.		, 41 CT1
Please return all corres	pondence concerning this ma	tter to the following:		7.0HH0.1
	PABLO AVILA	SR	•.	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
	PC AVILA PAI	Name of Contact Person		
	0004 NUALO4 O	Firm/ Company		
<u>.</u>	<u>2331 NW 34 S</u>			
	MIAMI, FL 331	Address 42		
-		City/ State and Zip Cod	e	
pab	oloavila988@g	mail.com		
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Pablo Avila	Sr.	_{at (} 786	972-6966	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)	
	: A 1 1	6		

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

Articles of Amendment to Articles of Incorporation

P1400027856 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following aircend its Articles of Incorporation: A. If amending name, enter the new name of the corporation. The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviat "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	iew ion
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D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida,	
(City) (Zip 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	VP		OSMIN Y GUZMAN	618 NW 25 CT.
✓ Add				MIAMI, FL 33125
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				<u> </u>
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		_		
Remove				
Keinove				

ttach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
•	
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an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendmen	t(s) adoption: 03/11/2015	, if other than the
date this document was signed		
Effective date if applicable:	03/11/2015	_
•	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	,,,	
, <u> </u>	(voting group)	
	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_03/^	11/2015 12/0 h. Auto	
S	ya director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	PABLO AVILA SR	
	(Typed or printed name of person signing)	-
	PRESIDENT	
	(Title of person signing)	_