P14000071638

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

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	RATION: JSP HOME		IT INC			
DOCUMENT NUM	BER: P1400007163	8				
	of Amendment and fee are sul					
Please return all corre	spondence concerning this mat	ter to the following:				
	AROLDO SILVA					
	711OLDO OILVA	Name of Contact Persor				
	JSP GENERAL F					
		Firm/ Company				
	5031 NW 198 ST	• •				
		Address				
	MIAMI GARDEN	S FL 33055				
		City/ State and Zip Code	e			
INI	FO@ACCOUNTA	XGROUP.COM		170		
		sed for future annual report	notification)		14 KOV	-
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For further information	on concerning this matter, pleas	se call:		- '	i I	5
AROLDO SI	LVA	at (305	, 409 8900	:. -:/·	PH 2: ₁ 21	I I
Name of Contact Person			de & Daytime Telephone	Number	~;·	
Enclosed is a check f	or the following amount made	navable to the Florida Dena	artment of State	1>	Œ	
		payable to me Florida 2 opt	aranom or 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 Street Address						
	nendment Section vision of Corporations		Iment Section on of Corporations			
		D *********				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

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

ME IMPROVEMENT INC

P1H000071638 JSP HOME IMPROVEMENT INC

(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corpor JSP GENERAL PAINTING CORP	ration: The new
	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	SAME ADDRESS
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME ADDRESS
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
	25 E
. (1	Florida street address)
New Registered Office Address:	(City), Florida(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
Signature of New Re	reistered Avent, 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 Jo	<u>ones</u>		14 HO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
X Add	<u>sv</u>	Sally S	<u>nith</u>		- Carlotte
Type of Action (Check One)	<u>Title</u>	•	Name	<u>Addres</u> s	
1) Change					FII 2:28
Add Remove					
2) Change					
Add				 	
Remove 3) Change		_			
Add					
Remove				<u></u>	
4) Change		_			
Remove					
5) Change					
Add Remove					
6) Change					
Add					
Remove					

(Attach additional sheets, if necessary). (Be specific)		
N/A		_
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F. If an amendment provides for an exchange, reclassification, or cancellation of issu- provisions for implementing the amendment if not contained in the amendment i	ued shares, itself:	
(if not applicable, indicate N/A)		
N/A		
		_
		-
		_
	 	_
		_
		_

The date of each amendment(s) adoption: 10/26/2014	if other than the
date this document was signed.	
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. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each 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)	-11
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	, answa , anderw , anderw , anderway
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	x mining
Dated_10/26/2014	
Signature $A.S./va$	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
AROLDO SILVA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	