| (F | Requestor's Name) | . | |
|---|-------------------------|---------------|--|
| (A | Address) | | |
| (<i>P</i> | Address) | | |
| (0 | City/State/Zip/Phone #) | | |
| PICK-UP | WAIT | MAIL | |
| (E | Business Entity Name) | | |
| (Document Number) | | | |
| Certified Copies | Certificates of | Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORAT | ION: USA PAINTING | AND GENERAL SER\ | /ICE OF SW FL, CORP | |
|-------------------------------|---|---|---|--|
| DOCUMENT NUMBER | D1/100008103 | | | |
| The enclosed Articles of A | mendment and fee are su | bmitted for filing. | | |
| Please return all correspon | dence concerning this mat | iter to the following: | | |
| . AF | RTURO RIVES | | | |
| | | Name of Contact Persor | 1 | |
| US | USA PAINTING AND GENERAL SERVICE OF SW FL, CORP | | | |
| مستحديد سيوب | ******* | Firm/ Company | | |
| 52 | 5281 HUNTER BLVD APT A | | | |
| | | Address | | |
| N | APLES, FL 341 | 16 | | |
| | | City/ State and Zip Code | | |
| | | | | |
| | E-mail address: (10 he us | ed for future annual report | notification) | |
| | E man address, to be as | ed for facult unfact report | , | |
| For further information con | ncerning this matter, pleas | e call: | | |
| OLGA RAMOS | | at (239 | , 455-6011 | |
| | ontact Person | at (Area Coe | de & Daytime Telephone Number | |
| Enclosed is a check for the | following amount made p | payable to the Florida Depa | rtment of State: | |
| \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □S43-75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Amendn Division P.O. Bo | Address nent Section of Corporations x 6327 see, FL 32314 | Amend Divisio Clifton 2661 E | Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301 | |

Articles of Amendment to Articles of Incorporation of

USA PAINTING AND GENERAL SERVICE OF SW FL, CORP

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

P14000081036

lment(s) to

| (Document Number of Corporation (| f known) | |
|---|---|--|
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the following amend | |
| A. If amending name, enter the new name of the corporation: | | |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation | Co". A professional corporation name must contain | |
| B. Enter new principal office address, if applicable: | 5281 HUNTER BLVD APT A | |
| (Principal office address MUST BE A STREET ADDRESS) | NAPLES, FL 34116 | |
| C. Enter new mailing address, if applicable: | 5281 HUNTER BLVD APT A | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | NAPLES, FL 34116 | |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address | | |
| Name of New Registered Agent | | |
| (Florida sn | eet 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 2 | Igent, 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 Doe | |
|----------------------------|--------------|---------------|----------------------|
| X Remove | V | 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 | LIZADRA BOUZA | 5281 HUNTER BLVD APT |
| Add | | | NAPLES, FL 34116 |
| Remove | | | |
| 2) Change | - | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Ađd | | | |
| Remove | | | |

| | dding additional Art sheets, if necessary). | (Be specific) | | | |
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| an amendment | provides for an excl | nange, reclassific: | ation, <u>or cancella</u> | tion of issued shar | ·es. |
| rovisions for in | nplementing the ame cable, indicate N/A) | enament 11 not co. | ntained in the am | enament itsen: | |
| Lif not annlie | time, marcare (1771) | | | | |
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| The date of each amendment(s) adoption: 10/14/2014 date this document was signed. | _, if other than the |
|--|----------------------|
| Effective date if applicable: 10/14/2014 | |
| (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 east for the amendment(s) was/were sufficient for approval | |
| by | |
| (voting group) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. | |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated 10/14/2014 | |
| Signature Signature | |
| (By afficer), president or other officer – if directors or officers have not been | _ |
| scleded, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| appended inductary by that inductary) | |
| ARTURO RIVES | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |
| (Title of person signing) | |