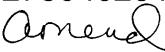
P15000034309

(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:

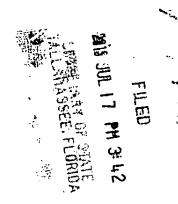
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A RAMES AND

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: OCHOA PAINTIN	G & WATERPROOFING	S CORP		
DOCUMENT NUM	P15000034309				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	AECIO R OCHOA				
	Name of Contact Person				
	OCHOA PAINTING & WATERPROOFING S CORP				
		Firm/ Company			
	4364 NW 9TH AVE , BLOCO 15 -1D # 232				
	Address				
	POMPANO BEACH, FL 33	064			
	City/ State and Zip Code				
For further information	E-mail address: (to be use on concerning this matter, please	sed for future annual report	notification)		
AECIO R OCHOA		at (
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check for	or 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

OCHOA PAINTING & WATERPROOFING S CORP	215 JUL 17 PM 3:42
(Name of Corporation as o	currently filed with the Florida Dept. of State)
P15000034309	COMME ENEY OF GEATE
(Document No	umber of Corporation (if known)
	tes, this Florida Profit Corporation adopts the following amendment(s) to
its Articles of Incorporation:	
A. If amending name, enter the new name of the corpora	tion:
<u> </u>	The new
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	1)
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	fice address in Florida, enter the name of the address:
Name of New Registered Agent	
(F.	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	d Agents
I hereby accept the appointment as registered agent. I am f	
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	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	AIRTON FRANCISCO ALVES	4364 NW 9TH AVE
X Add			BLOCO 15 -1D # 232
Remove			POMPANO BEACH, FL 33064
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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n amendment provides for an exchai	nge, reclassificati	on, or cancella	tion of issued sh	iares,	
ovisions for implementing the amend (if not applicable, indicate N/A)	lment if not cont	ained in the an	endment itself:		
(ij noi applicable, maicule 1471)					
	····				
					<u> </u>

07/13/2015	الم ومالي مالي
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
07/13/2015 Effective date if applicable:	
(no more than 90 d	ays after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The nuby the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot	h voting groups. The following statement e separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were s	ufficient for approval
by(voting group)	<u> </u>
(voting group)	
■ The amendment(s) was/were adopted by the board of directors wi action was not required.	thout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators withou action was not required.	t shareholder action and shareholder
07/13/2015	
Dated	<u></u>
Sign ture	- if directors or officers have not been
	ands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	**************************************
AECIO R OCHOA	
(Typed or printed nat	ne of person signing)
PRESIDENT	
(Title of	person signing)