## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : MBA SERVICES LLC

Account Number : 120230000024 Phone : (561)317-8154

: (754)663-5154 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

| Email Address: |
|----------------|
|----------------|

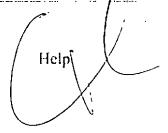
## COR AMND/RESTATE/CORRECT OR O/D RESIGN JBB PAINTING CORP

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$35.00 |

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Electronic Filing Menu

Corporate Filing Menu



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## Articles of Amendment to Articles of Incorporation

| · Alik   | cies of incorporation   |
|--|---|
| JBB Painting Corp  | θf  |
| P1500035537  | currently filed with the Florida Dept. of State)  |
| (Document)   | Number of Corporation (if known)  |
|  | utes, this Florida Profit Corporation adopts the following amendment(s)   |
| A. If amending name, enter the new name of the corpor KRAFT SERVICES CORP  | <del></del>   |
| name must be distinguishable and contain the word "corpor" Inc.," or Co.," or the designation "Corp." "Inc." or "chartered," "professional association," or the abbreviation | ation," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word on "P.A." |
| B. Enter new principal office address, if applicable:  | 3742 North Federal Highway #1089  |
| (Principal office address MUST BE A STREET ADDRES  | (S) Lighthouse Point, FL 33064  |
| :  | S) Lighthouse Point, FL 33064   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)  | 3742 North Federal Highway #1089  |
|  | Lighthouse Point, FL 33064  |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent                                  | ffice address in Florida, enter the name of the address:  |
| <i>(1</i>  | lorida strvet address)  |
| New Registered Office Address:   | , Florida   |
| •  | стр сте   |
| New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am'y  | d Agent:  |
| I hereby accept the appointment as registered agent. I am'f  | tamiliar with and accept the obligations of the position.   |
|  | of New Registered Agent, if changing  |
| Signature c  | of New Registered Agent, if changing  |
| Check if applicable  The amendment(s) is/are being filed pursuant to s. 607.01   | 120 (11) (e), F.S.  |
|  |   |
|  |   |

Example:

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## 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                      | PT          | John Doe    | i<br>;   |         |  |
|-------------------------------|-------------|-------------|----------|---------|--|
| ∑ Remove                      | <u>Y</u>    | Mike Jones  | !        |         |  |
| _X Add                        | SY          | Sally Smith | }<br>!   |         |  |
| Type of Action<br>(Check One) | Title       | Name        |          | Address | 2023 AUG 24                                    |
| 1)Change                      |             | <del></del> |          |         | PAR NO   |
| Add                           |             |             |          |         | 324<br>75.6                                    |
| Remove                        |             |             | !<br>! • |         | - (SC) <b>%</b>                                |
| 2) Change                     |             |             |          | <u></u> | 1110   |
| Add                           |             |             |          |         | 33<br>F1.                                      |
| Remove 3) Change              |             |             |          |         |  |
| Add                           |             |             | •        |         |  |
| Remove                        |             |             | :<br>:   |         |  |
| 4) Change                     |             |             |          |         |  |
| Add                           |             |             |          |         | **************************************         |
| Remove                        |             |             | ·<br>{   |         |  |
| 5) Change                     | <del></del> |             |          |         | <del></del>                                    |
| Add                           |             |             | <u>:</u> |         |  |
| Remove                        |             |             | ·<br>·   |         | ·  |
| 6)Change                      | *********** |             |          |         |  |
| Add                           |             |             |          |         | <del></del>                                    |
| Remove                        |             |             |          |         | <u>-                                      </u> |
|                               |             |             |          |         |  |

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| ttach additional sheets, if necessary).   | (ne specific)  |  |                                       |   |
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| n amendment provides for an exch  | ange, reclassification, or cance                                   | illation of issued shares,                               |                                       |   |
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| The date of each amendment(s) adoptio date this document was signed.                   | n:   | , if other than the |
|--|--|---------------------|
| Effective date if applicable:  |  |                     |
|  | (no more than 90 days after amendment file date)   |                     |
| Note: If the date inserted in this block d document's effective date on the Department | oes not meet the applicable statutory filing requirements, this date will no   | ot be listed as the |
| Adoption of Amendment(s)   | (CHECK ONE)  |                     |
| The amendment(s) was/were adopted b action was not required.                           | y the incorporators, or board of directors without shareholder action and sh   | areholder           |
| ☐ The amendment(s) was/were adopted b by the shareholders was/were sufficient          | y the shareholders. The number of votes cast for the amendment(s)  | 2023                |
|  | by the shareholders through voting groups. The following statement of the group entitled to vote separately on the amendment(s): | 2023 AUG 24         |
|  | amendment(s) was/were sufficient for approval  | ` <u> </u>          |
| by   | (voting group)   |                     |
|  | (voting group)   | 9: 33<br>STATE      |
| 08/23/2023   |  | i                   |
| DatedSignature   | 20080  |                     |
| (By a director)  | president or other officer - if directors or officers have not been  |                     |
|  | incorporator—if in the hands of a receiver, trustee, or other court action by that fiduciary)                                    |                     |
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| may gray and and a   | (Typed or printed name of person signing)  |                     |
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