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COVER LETTER

Division of Corpo	rations			
NAME OF CORPORATION: St. Augustine Painting Inc. DOCUMENT NUMBER: P1500061487				
DOCUMENT NUMB	ER: <u>/ / 3 о о</u> о	061781		
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
-	Gerard	Chevres Name of Contact Person	- / c	
ST. Augustine Painting Inc. Firm/Company				
ST. Augustine, FL. 32080 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Gesasal	Chausette	at (90 4	1 325-1645	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mail	ing Address	Stroot	Address	

Mailing Address

TO: Amendment Section

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 of

ST. A ugustine P	ainting Inc.			
,				
191500061 (Document Number o	487 of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	•	owing amen	dment(s) to
A. If amending name, enter the new name of the corporation:				
name must be distinguishable and contain the word "corporation	Painting Inc.	The	new	
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 m	ne abbrevia nust contain	tion the	
B. Enter new principal office address, if applicable:	N/A			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		***		
		ेम्		
		. L . 1	77	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	7, 2	t	
		<u>, 16</u>	77 5	į.
		T. 2		٠,
·			-8	
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 st	reet address)			
New Registered Office Address:	, Florida	<i>a</i> : <i>c</i> . L .		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		ion.		
Thereby accept the appointment as registered agent.	and accept the congunous of the positi			
Signature of New	Registered Agent, if changing			
ingrature of trew				

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	<u>v</u>	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			
Add			
Remove			
2) Change			
Add		\ \	
Remove		\ \	
3) Change		_ \	<u> </u>
Add			
Remove		1 1	
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Kemave			

	s, enter change(s) here: Be specific)		
	V/A		
,			
		 	
			•
		,	
			
	:		
	1 100 11	cellation of issued shares,	
an amendment provides for an exchang	e, reclassification, or can	12	
rovisions for implementing the amendn	nent if not contained in the	e amendment itself:	
an amendment provides for an exchang rovisions for implementing the amendn (if not applicable, indicate N/A)	nent if not contained in the	e amendment itself:	
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rovisions for implementing the amendn	nent if not contained in the	e amendment itself:	

	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after am	nendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of vot by the shareholders was/were sufficient for approval.	es cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gromust be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareh action was not required.	older action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholde action was not required.	r action and shareholder
Dated	
Dated 9/8/2015 Signature Levered Chamelle	
(By a director, president or other officer – if director	s or officers have not been
selected, by an incorporator – if in the hands of a rec	
appointed fiduciary by that fiduciary)	
Gerard Chev	
(Typed or printed name of person	signing)
	<i>C C</i> .
Presid	an T
(Title of person signing)	ng)