P150000 14065

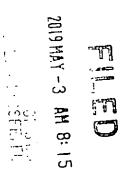
(Requestor's Name)
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C. GOLDEN MAY 1 6 2019

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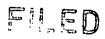
TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Meridian Painti	ng. Inc.	
DOCUMENT NUM	BER: P15000074065		
The enclosed Articles	of Amendment and fee are si	abmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	Cheryl A. Sanders		
		Name of Contact Perso	en
	Go Professional Services, In	c.	
		Firm/ Company	
	13116 Sherman Drive	, ,	
		Address	
	Hudson, FL 34667		
		City/ State and Zip Cod	C
go.pr	ofessional.services@gmail.co	m	
	.,,	sed for future annual report	notification)
		r	
For further informatio	n concerning this matter, plea	se call:	
Cheryl A. Sanders		at (⁷²⁷	678.8499
Name	of Contact Person	at () Area Code & Daytime Telephone Numb	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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)
	ling Address	•	Address
	endment Section		Iment Section
	sion of Corporations Roy 6327		on of Corporations

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



D16000074076	tly filed with the Florida Dept. of		
P15000074065		Ci o v	
(Document Number of	of Corporation (if known)	with some and the second	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopt	s the following amendment(s) t	
A. If amending name, enter the new name of the corporation:			
Go Professional Services, 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	ed" or the abbreviation	
B. Enter new principal office address, if applicable:	13116 Sherman Drive		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Hudson, FL 34667		
D. If amending the registered agent and/or registered office add		f the	
new registered agent and/or the new registered office addres	<u>s:</u>		
Name of New Registered Agent N/A			
	rect address)		
(Florida st			
(Florida st New Registered Office Address:	Flo	orida	
	(City)	orida(Zip Code)	
	(Ciţ;)	(Zip Code)	

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	Pres	Cheryl Sanders	13116 Sherman Dr
Add			Hudson, FL 34667
Remove			
2) X Change	VP	Bryan D. Holines	37420 Hickory Hill
Add			Dade City, FL 33525
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
.5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Much adam	or adding addition: onal sheets, if necess	sary). (Be specific	;)			
	NIA					
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***	-	·			· · · · · · · · · · · · · · · · · · ·	
						
					<u>.</u>	
<u>f an amendn</u> provisions fe	ent provides for an r implementing the	i exchange, reclass	ification, or can	cellation of issued	shares,	
(if not ap	plicable, indicate N	/A)	contained in th	e amendment itsei	<u>1:</u>	
N	lA					
	<u></u>					
						
·						
	-					
						

The date of each amendment() date this document was signed.	s) adoption:	, if other than the
_	May 1, 2019	
Effective date if applicable:	·	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendmer e sufficient for approval.	nt(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder.	lder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
4/30/2 Dated	019	
selo	a director, president or other officer – if directors or officers have not bee cted, by an incorporator – if in the hands of a receiver, trustee, or other co	
арр	ointed fiduciary by that fiduciary) Chery A. Sanders	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	-,