P150000099459

(Re	equestor's Name)			
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
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DEC 29 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corpo	prations				
NAME OF CORPOR	.	Professional	Painting, dric		
	•				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Razoco	J. Trimino Name of Contact Person			
	LIT Profess	Name of Contact Person Signal Painting Firm/Company	J. Inc		
		Address			
	Coral Stable	S, FL 33134 City/ State and Zip Code			
•		City/ State and Zip Code	e		
	Toon tuminot	4@yahoo.com			
		sed for future annual report	notification)		
		·			
For further information	concerning this matter, pleas	se call:			
Razoro J.	Trimino of Contact Person	at (_ 786	_ ₎ 797 -4227		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	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	☐\$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 Street Address			Address		
Amendment Section		Amendment Section			
	sion of Corporations		on of Corporations		
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					
1 4114	1114435CC, 1 L. J & J L T	4001 E	ACCULTYC CCITICI CITCIE		

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

JT P	rofe ss	ional	Painting	Inc

P15000099	9659			
(Document Number of	Corporation (if known)	<u>.</u>		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the f	ollowing	amendm	ent(s)
A. If amending name, enter the new name of the corporation:				
			The nev	V.
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered." "professional association," or the abbreviation "F	o". A professional corporation nam	the ab	breviation ontain the	n e
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)				
		à	rea	
				s,. **u
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			ř C)	ا
		٠.	<u>13</u>	-
		•	70	
			-:	
D. If amending the registered agent and/or registered office addre		-) 10	
new registered agent and/or the new registered office address:		· •	•	
Name of New Registered Agent				
				
(Florida stree	et uddress)			
New Registered Office Address:	, Florida_ City)	(Zip C	ode)	
''	···•,	(2.7)	,	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the second s	ith and accept the obligations of the po	esition.		
Signature of New Re	gistered 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>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>			Address
1) Change	V	Raik	o yusef Ferr	nondez	6660 SW 130th Ave
<u></u> ★ Add				•	Apt # 1714
Remove					Miami, FL 33183
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and an and an analysis and analysis and an analysis and an analysis and analysis and an analysis analysis and an analysis a

The date of each amendment(s) adoption:	12/19/2016	, if other than the
date this document was signed.		
Effective date if applicable:	12/19/2016	
(1	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not a document's effective date on the Department of Sta	meet the applicable statutory filing requirements, the s records.	nis date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for appr	reholders. The number of votes cast for the amenda roval.	nent(s)
	nareholders through voting groups. The following sta oup entitled to vote separately on the amendment(s)	
"The number of votes cast for the amendm	nent(s) was/were sufficient for approval	
by(voting	."	
(voting	group)	
☐ The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action and share	holder
The amendment(s) was/were adopted by the incoaction was not required.	orporators without shareholder action and sharehold	er
Dated12 19 201	16	
Signature	and a	
(By a director, presider	nt or other officer - if directors or officers have not l	 peen
	orator - if in the hands of a receiver, trustee, or other	court
appointed fiduciary by	that fiduciary)	
Roza	ro J. Yımıno ped or printed name of person signing)	
et y	ped or printed name of person signing)	
Pro	esident	
	(Title of person signing)	