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JAN 14 2016 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations	
LB PAINTING & REMODELING CORP NAME OF CORPORATION:	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
SUASTEGUI, LEONEL S	
(Name of Contact Person)	
LB PAINTING & REMODELING CORP	
(Firm/ Company)	
5665 BARNHILL DR APT 43	
(Address)	
JACKSONVILLE, FL 32207	
(City/ State and Zip Code)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
SUASTEGUI, LEONEL S 904 2009377	
(Name of Contact Person) (Area Code) (I	Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State	e:
(Additional copy is Certified	e of Status Copy al Copy is
Mailing Address Amendment Section Amendment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LB PAINTING & REMODELING CORP			
(Name of Corporation as cur	rently filed with the	Florida Dept. of State)	
P15000101302			
(Document Nu	mber of Corporation	(if known)	
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	tutes, this <i>Florida No</i>	of For Profit Corporation adopts the fo	ollowing
A. If amending name, enter the new name of the corporation	ration:		
			The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorpo	rated" or the abbreviation "Corp." or	Tinc."
Company of Co. may not be used in the name.		,	A A
B. Enter new principal office address, if applicable:			<u> </u>
Principal office address <u>MUST BE A STREET ADDRES</u>	<u>sz</u>)	· ·)
		1 ·	
			2
		2	
C. Enter new mailing address, if applicable:		عر مر	ا''ا دنا
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		ida, enter the name of the	
new registered agent and/or the new registered offic	ę auui ess.		
Name of New Registered Agent:			
		(Florida street address)	
New Registered Office Address:		(a to that sit certain easy	
· · · · · · · ·			
	(0:4)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		cept the obligations of the position.	
	Signature of New R	egistered 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	Brenda Yamileth Ramos Maldonado	5665 BARNHILL DR apt 43
X Add Remove			JACKSONVILLE, FL 32207
2) Change			
Add			
3) Change		<u> </u>	
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change Add	<u> </u>		
Remove			
5) Change Add			
Remove			. ,
6) Change Add			
Remove			

amending or adding additional Art ttach. additional sheets, if necessary).	(Be specific)

The	date of each amendment(s) adoption:	, if other than the
date	this document was signed:	
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
Note locu	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi ment's effective date on the Department of State's records.	Il not be listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.)
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 01-09-16	
	Signature	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Leonel Salome Suastegui (Typed or printed name of person signing)	
	(Title of person signing)	