Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H160001786283)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LICENSES ETC INC

Account Number : I20070000159 Phone : (235)777-1028

Fax Number : (877)275-3593

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

Email Address: ETC@LICENSESETC.COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN EXTREME PAINTING, INC.

Certificate of Status	0
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Page Count	07
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JUL 26 2016

COVER LETTER

TO: Amendment Sect Division of Corpo					
NAME OF CORPOR	RATION: EXTREME PAIN	TING, INC.			
DOCUMENT NUMBER: P16000005143					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
	Lisa Adams				
		Name of Contact Person	1		
	Licenses, Etc.				
	•	Firm/ Company			
	886 H0th Ave. N. #6				
		Address			
	Naples, FL 34108				
		City/ State and Zip Code	2		
etc@licensesetc.com					
And the state of t	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Lisa Adams		at (239	777-8321		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

XTREME PAINTING, INC.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
16000005143	
(Document Number o	of Corporation (if known)
arsuant to the provisions of section 607.1006. Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
If amending name, enter the new name of the corporation:	
	The new
nne must he distinguishable and contain the word "corporatio Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " ord "chartered," "professional association," or the abbreviation	n," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	> 5
Enter new mailing address, if applicable:	્રિક્સ ડિક્સ ફ્રિક
(Muiling address MAY BE A POST OFFICE BOX)	7
If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
	-
Name of New Registered Agent	
(T1) 1	
(r)orida si)	reet address)
17 Th . 100 M . 111	Florida
New Registered Office Address:	(City) (Zip Code)

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; CEO = 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	<u>PT</u>	John Doe	,
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1)Change	PSTD	Duane Lopez	2451 ASIIBURY CIRCLE
Add			CAPE CORAL, FL 33991
X Remove		•	
2) Change	P	Jennifer Lopez	2451 ASHBURY CIRCLE
X Add			CAPE CORAL, FL 33991
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add		_	
Remove			
Kemove			

(((H160001786283))) E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by" (voting group)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
7/25/2016 Dated
Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that (iduciary)
Duane Lopez
(Typed or printed name of person signing)
PSTD
(Title of person signing)