P1600018146

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(Re	equestor's Name)	
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SECRETARY OF STATE
TALLAHASSEEL FLORIDA

JUL 23 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ECHEVERRIA P	AINTING INC.	
DOCUMENT NUMB	ER: P16000018146	<u>-</u> -	
	of Amendment and fee are su	ibmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
1	ECHEVERRIA VALDEZ, A	ALFONSO	
-		Name of Contact Person	n
-		Firm/ Company	
:	501 W BALL ST11		
-		Address	
ı	PLANT CITY, FL 33563		
-		City/ State and Zip Cod	e
echev	erria85@icloud.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
ECHEVERRIA VALC	DEZ, ALFONSO	at (704-1561
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ECHEVERRIA PAINTING INC.	

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P16000018146	
(Document Numbe	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corpora" ("Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," oword "chartered," "professional association," or the abbreviatio	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	14 SE 18
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
C. Enter new mailing address, if applicable:	THE E O
(Mailing address MAY BE A POST OFFICE BOX)	0.7
	AND T
D. If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr	
	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida (City) (Zip Code)
	(only
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
	The state of the s
Signature of Nev	v 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Veronica Ravalcaba	501 W BALL ST APT 11
X Add			PLANT CITY FL 33563
Remove			
2) X Change	VP	Alfonso, Echeveria Valdez	501 W BALL ST APT 11
Add			PLANT CITY FL 33563
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			_
Add			
Remove			
6) Channa			
6) Change		-	_
Add			
Remove			

	(Be specific)
-	
	
	
	_
nrovisions for implementing the ame	hange, reclassification, or cancellation of issued shares,
provisions for implementing the anic	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	07/16/2018	
The date of each amendment(s date this document was signed.	adoption:	_, if other than the
	7/16/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
07/16/2 Dated	018	
Signature ===		
(By- sele	director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	_
	ALFONSO ECHEVERRIA VALDEZ	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	