P1600019101

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	·





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GARCIA RUIZ PA	AINTING SERVICES INC	
	BER: P16000019101		<u> </u>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	RODRIGO GARCIA RUIZ		
		Name of Contact Persor	1
	GARCIA RUIZ PAINTING	SERVICES INC	
	·	Firm/ Company	
	329 N 13TH ST		
		Address	
	HAINES CITY FL 33844		
		City/ State and Zip Code	<u> </u>
AM	ERICATAXSERVICES@GM.	AIL.COM	
	_	sed for future annual report	notification)
For further information	on concerning this matter, pleas)
Name	of Contact Person	Area Co	_)
Enclosed is a check f	or 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)
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

GARCIA RUIZ PAINTING SERVICES

(Name of Corporation	n as currently filed with the Florid	la Dept. of State)
P16000019101		
(Docume	ent Number of Corporation (if know	1)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpora	ation adopts the following amendment(s)
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	" "Inc," or "Co". A professional	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>)		
		
	 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	K 1	
(maining dual cos main los in vost of the main	·	
		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent.		ligations of the position
	in junior in the coupling of	is.
		2011
Signa	tture of New Registered Agent, if cha	inging 3
		D D

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>	Name	<u>Addres</u> s
1) Change	VP	CARRILLO ANDY Y	3394 PATTERSON HEIGHT DR
X Add			HAINES CITY, FL 33844
Remove			
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)		
			
<u> </u>		<u>.</u>	
			
		<u>-</u>	
	_		
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancender in the	ellation of issued shares, amendment itself:	
			
-			
			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 cast for the amendment(s) was/were sufficient for approval	
by	
(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.	
Dated	
Signature (B), a director president or officer – if directors or officers have not been	
appointed tiqueians by that fiduciary)	
RODRIGO GARCIA RUIZ	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)