P16000021356

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(Ad	dress)	
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C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Rainbowl Stucco, MC DOCUMENT NUMBER: P1690021356
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rod A. Custer
Name of Contact Person
_ Kanbow Stucco, Inc
Firm/ Company
4121 Pecos Drive
New Port Richer FL 34653
City/ State and/Zip Code
betyboop 5266 E aol.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rod A. Custer at 127, 495-8948
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation

(Name of Corporal P 46 (Documents)	tion as currently filed with the Florida Dept. of State) ### State ### Stat			-
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following	ng amendn	nent(s) to	•
A. If amending name, enter the new name of the	corporation:			
	ord "corporation," "company," or "incorporated" or the cop," "Inc," or "Co". A professional corporation name must be abbreviation "P.A."		on	
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	<u>ox</u>)	24 (9) 27 (9) 28 (9) 30 (9)	2815 A	ي امير
D. If amending the registered agent and/or registered agent and/or the new registered	ered office address in Florida, enter the name of the d office address:	第二次 第二次 第二次	APR II PM	
Name of New Registered Agent		- LOZIE FOZIE FOZIE	PM 4: 2	į,
	(Florida street address)	— 1 2	თ	
New Registered Office Address:	(City) , Florida (Zip	Code)		
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with and accept the obligations of the position.	_		

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 <math>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	PT Jo	<u>hn Doe</u>	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ully Smith	
Type of Action (Check One) 1) Change	Title	Rod A. Custer	Address 4121 Pecos Brive New Port-Richey
Add Remove			FL 34653
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)
	- · · · · · · · · · · · · · · · · · · ·
f 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 ment if not contained in the amendment itself:

The date of each amendment(s) adoption:	,	if other than the
date this document was signed. • Effective date if applicable:	april 4, 2016	
(no	no more than 10 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State	neet the applicable statutory filing requirements, this date will not te's records.	t be listed as the
Adoption of Amendment(s) (CHECK	K ONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	reholders. The number of votes cast for the amendment(s) oval.	
	areholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendme	ent(s) was/were sufficient for approval	
by	. 17	
(voting g	group)	
☐ The amendment(s) was/were adopted by the board action was not required.	rd of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incoraction was not required.	orporators without shareholder action and shareholder	
Dated Opril 4,	2016	
Signature \mathcal{A}	C	
	at or other officer – if directors or officers have not been	
selected, by an incorpora appointed fiduciary by t	rator – if in the hands of a receiver, trustee, or other court	
appointed indicially by t		
	Kod A. Custer	
(Турс	ped or printed name of person signing)	
	President	
	(Title of person signing)	