Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000073646 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: FASTKIT CORP

Account Number : I20100000009

Phone

: (305)599-0839

Fax Number

: (305)592-9591

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

Email Addre	88:			

COR AMND/RESTATE/CORRECT OR O/D RESIGN DAFAE PAINTING CORP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00



. of 2

Articles of Amendment to Articles of Incorporation of

DAFAE PAINTING CORP				
(Name	of Corporation as curre	ntly filed with the Florida Dep	t. of State)	
P16000021437				
	(Document Number	of Corporation (if known)		`
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation a	dop's the following amend	dment(s) to
A. If amending name, enter the new ne	ume of the corporation:			
name must be distinguishable and com "Corp.," "Inc.," or Co" or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corpore	orated" or the abbrevia	tion the
B. Enter new principal office address, if applicable:		15302 SW 119 ST		
	(Principal office address MUST BE A STREET ADDRESS)			-
				-
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		15302 SW 119 ST		_
		MIAMI, FL. 33196		_
				_
D. If amending the registered agent an new registered agent and/or the new			ne of the	
Name of New Registered Agant	EDWIN MONTOYA			
	15302 SW 119 ST			
	(Florida s	traet address)		
New Registered Office Address:	MIAMI		, Florida 33196	_
	·	(City)	(Zip Code)	-
New Registered Agent's Signature, if ch I hereby accept the appointment as registed	ered agent. I am familian	tt: with and occept the obligations Registered Agent, if changing	STERRETARY OF STATE OF STATE ALLEGENERAL ASSEE, FLORE	

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 Y. There is a change, Mike Jones leaves the corporation, Sally Smith is named the Y and S. These should be noted as John Doe, PT as a Change, Mike Jones, Y as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doc	
X Remove	¥	Mike Jones	
_X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PRES	XAVIER, JOHN G	19805 SW 216 ST
Add			MLAMI, FL. 33170
Х Колоче			
2) Change	PRES	MONTOYA, EDWIN	15302 SW 119 ST
X Add			MIAMI, FL. 33196
Remove			
3) Change			
Add		•	<u> </u>
Remove			
4) Change			
Add			,
Remove			
ゴ) Change			
Add		_	
Келоче		- .	
6) Change			
Add			
Remove	•		
			

•	icles, enter change(s) here: (Be specific)
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
an amendment provides for an excharge in a cacharge in the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
royisions for implementing the amon	ange, reclassification, or cancellation of issued shares, dement if not contained in the amendment itself:
royisions for implementing the amon	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
rovisions for implementing the amon	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
rovisions for implementing the amon	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
rovisions for implementing the amon	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:

The date of each amendment(s) ad	03/22/2016	, if other than the
date this document was signed.	уричи.	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this deartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	•
The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the amendment(ficient for approval:	s)
☐ The amendment(s) was/were appr must be separately provided for a	oved by the shatcholders through voting groups. The following statem ach voting group entitled to vote separately on the amendment(s):	ent
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) wes/were adopt action was not required.	sted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were adopt action was not required.	sted by the incorporators without shareholder action and shareholder	
03/22/2016 Dated	BH to.	
(By a dir	ector, president or other officer - If directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other com d fiduciary by that fiduciary)	t
	EDWIN MONTOYA	
-	(Typed or printed name of person signing)	
	PRESIDENT	1
-	(Title of person signing)	