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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: Diaz Painting & Su	applies International Inc	
	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Manolo Diaz		
		Name of Contact Person	1
		Firm/ Company	
	224 W Trail Dr		
		Address	· · · · · · · · · · · · · · · · · · ·
	West Palm Beach FL 33415		
		City/ State and Zip Code	2
	Diaz_Manolo@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Manolo		at (670-9038
Name of Contact Person		at (561) 670-9038 Area Code & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

Diaz Painting & Supplies International Inc (Name of Corporation as currently filed with the Florida Dept. of State P160000316698 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Manolo's Painting & Handyman Services Inc name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: <u>X</u> Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			71
X Add	<u>sv</u>	Sally Smith			2020 HAT
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	. /	<u>Addres</u> s	5
1) Change			1/A		PH
Add				 	
Remove			/		
2) Change			N/P		
Add			/		
Remove Change			ZI/A		
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Remove					
4) Change		<u> </u>	K'/ F!		
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51 Change			KI/D		
Add			,		N.
Remove			1//		
6) Change					
Add					
Remove					

ttach additional sheets, if necessary). (Be specific)		
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an amendment provides for an exchange, reclassification rovisions for implementing the amendment if not contain (if not applicable, indicate N/A)	ined in the amendment itself:	
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rovisions for implementing the amendment if not contait (if not applicable, indicate N/A)	ined in the amendment itself:	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	•
Effective date if applicable:	e di en
(no more than 90 days after amendment file date)	-6 PH 1: 11
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	ī
The amendment(s) was/were adopted by the incorporators, or board of directors without sharehold action was not required.	ler action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amend by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following a must be separately provided for each voting group entitled to vote separately on the amendment(s)	statement):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by Thereto	
(voting group)	
Dated_05/1/2020	
Att (
Signature (Bus (Bus (Bus (Bus (Bus (Bus (Bus (Bus	
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or other	been er court
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
president.	
(Title of person signing)	