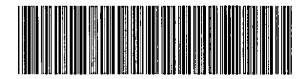
P16000077625

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PPS PAINTING O	F FLORIDA INC			
	ER: P16000077625				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
		YADIRA S JIMEN	EZ		
-	Name of Contact Person				
	l	PPS PAINTING OF FLOR	PAINTING OF FLORIDA INC		
-	······································	Firm/ Company			
	4338 KINGSFIELD DRIVE				
-		Address			
		PARRISH FLORIDA 342	19		
•		City/ State and Zip Code	c		
	jimen	ezyadira17@gmail.com			
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, plea		421-2821		
	f Contact Person	at (Area Co)		
	the following amount made				
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		Street Address Amendment Section			
	sion of Corporations	Division of Corporations			
	Box 6327	The Centre of Tallahassee			
Talla	hassee FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PPS PAINTING OF FLORIDA INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000077625

	1 100000077025	
	(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amenda
A. If amending name, enter the new n	ame of the corporation:	
"Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co",' or the abbreviation "P.A."	The ne- company," or "incorporated" or the abbreviation "Corp., 1-professional corporation name must contain the wor 4338 KINGSFIELD DRIVE
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		PARRISH FLORIDA 34219
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4338 KINGSFIELD DRIVE
		PARRISH FLORIDA 34219
D. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent		
Name of New Neglmerea Agent	4338 KINGSFIELD DRIV	TE
<u>New Registered Office Address:</u>	(Florida str	eet address) . Florida 34219
		(City) (Zip Code)
New Registered Agent's Signature, if call thereby accept the appointment as registed.	vered agent. I am familiar	: with and accept the obligations of the position. registered Agent, if changing

Check if applicable

 \Box 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 <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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo		
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				·
Add				
Remove				
2) Change		_		
Add				
Remove Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				\
Remove				
6) Change		_		
Add				
Remove				

	, if necessary).	(Be specific)			
					
			<u> </u>		
			_		<i>,,</i>
					
					-
			<u> </u>		
lf an amendment provid	<u>des for an exch</u>	ange, reclassific	ation, or cancella	tion of issued sha	res.
provisions for impleme	enting the amer	ndment if not co	ontained in the an	nendment itself:	
tif a standing limit is	пансане (угл.)				
(if not applicable, ii					
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days	after amendment file date)
Note: If the date inserted in this block does not meet the applicable s document's effective date on the Department of State's records.	tatutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	per of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through v must be separately provided for each voting group entitled to vote so	
"The number of votes cast for the amendment(s) was/were suff	icient for approval
by	<u> </u>
(voting group)	
06/15/2020 Dated	
(By a director, president or other officer – if selected, by an incorporator – if in the hand	
appointed fiduciary by that fiduciary)	
YADIRA S JIMENEZ	
(Typed or printed name)	of person signing)
PRESIDENT	
(Title of person signing)	· · · · · · · · · · · · · · · · · · ·