## P17000049022

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## COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: EMMA PAINTING CORP DOCUMENT NUMBER: P17000049022 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: IDEL A PANDO Name of Contact Person EMMA PAINTING CORP Firm' Company 550 NW 59TH CT Address MIAMI, FL 33129 City/ State and Zip Code JUAN@RSVTAX.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 305 ) 303 0040
Area Code & Daytime Telephone Number IDEL A PANDO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **S**35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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 of

EMMA PAINTING CORP

Check if applicable

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

(Name of Corporation as curren	itly filed with the Florida Dept. of State)	
P17000049022		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) t	
A. If amending name, enter the new name of the corporation:		
INFINITY SERVICES PROVIDERS INC.	The new	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	11261 NW 15TH CT	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI, FL 33167	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11261 NW 15TH CT	
	MIAMI, FL 33167	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent		
(Florida)	street address)	
New Registered Office Address:	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian		
Signature of New	Registered Agent, if changing	

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)

Example:

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.

X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary	Articles, enter change(s) here: y). (Be specific)
<del></del>	
If an amendment provides for an ex-	xchange, reclassification, or cancellation of issued shares,
provisions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
74	<del></del>

	December 1st, 2020	
the date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amer sufficient for approval.	idment(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment(	statement (s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Novembe Dated	r 30, 2020	
Signature y		
(By a selec	director, president or other officer – if directors or officers have no ed, by an incorporator – if in the hands of a receiver, trustee, or other nted fiduciary by that fiduciary)	ot been ner court
	IDEL A PANDO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	