P1700060171

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C. GOLDEN MAR 2 7 2018

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: KAR Propainting Corp.
DOCUMENT NUMBER: <u>P17000066777</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ramon Poreira
Name of Contact Person
Firm/Company
7800 Hardina Avo.
Address
City/ State and Zip Code
•
pereiros 18 @ Comillicom
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
P
Name of Contact Person at (\frac{180}{20}) \frac{207}{307} \frac{1}{350} \frac{1}{3
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\ \bigstyle \text{\$\subset\$35 Filing Fee & Certificate of Status (Additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to

Articles of Incorporation

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Kork Popainting Corp		2018 11 1.25	PK 3: 08
(Name of Corporation as currently f	filed with the Florida Dept. of S	tate)	1 12
P17000066777		Fre	., '
(Document Number of C	Corporation (if known)	.	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts	he following amo	endment(s) to
A. If amending name, enter the new name of the corporation:			
		The	new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P	". A professional corporation i	" or the abbrev name must conta	iation in the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	**	, , , , , , , , , , , , , , , , , , ,	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of t	<u>he</u>	
b 0 1	iguerz Valdes		
7800 Harding	His apt 5		
New Registered Office Address: Hiam? Blach	, Flori	da 33141	<u>'</u>
	••)	(Elp Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of th	e position.	
	,		
Signature of New Reg.	istered 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)

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: X_Change	<u>PT</u>	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	5	<u>Dunnia Roddguez</u>	7800 Hordeng Av
X_Add		v	apt #5, Ham beach
Remove			Flonela, 33141.
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Aud			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
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740-	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
T	
	•,

The date of each amendment(s) adoption: 03/19/2018 , if other than the
date this document was signed.
Effective date if applicable:03/19/20/8
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by Ranon Possesia, Hasea Costa Ferronde & (voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 03/19/2018.
Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Ramon Parcira
(Typed or printed name of person signing)
President
(Title of person signing)