P170000 77140

(Re	questor's Name)	
(Ad	ldress)	
4		
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(D.	usiness Entity Nar	no)
(BC	Isiness Enuty Nai	ne)
(Do	ocument Number)	······································
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000323476350

01/23/19--00017--034 ++25.06

02/12/19--01018--003 **10.00

FILED
2019 FEB 12 PM 2: 80

Anund

FEB 1 4 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations MERICA HAWTING, INC NAME OF CORPORATION: / The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DOCAL & SMAIL CI (to be used for future annual report notification For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy is enclosed)



January 30, 2019

STEPHEN HENDERSON 1261 E. OLYMPIA AVE STE. 304 PUNTA GORDA, FL 33950

SUBJECT: A'MERICA PAINTING, INC.

Ref. Number: P17000077140

We have received your document for A'MERICA PAINTING, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Limited Liability Company, but your entity is a Florida Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to file your document is \$35.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 819A00002194

Irene Albritton Regulatory Specialist II

	cles of Amendment to	FILED
A'MERICA PAW	les of Incorporation of TING, MC	2019 FEB 12 PM 2: 80
(Name of Corporation as	currently filed with the Flor	ida Dept. of State)
P/ +CO(0) -+7/9	umber of Corporation (if known	an)
Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation:		
A. If amending name, enter the new name of the corpora	ation:	-
name must be distinguishable and contain the word "co"Corp" "Inc.," or Co.," or the designation "Corp." "Ir word "chartered," "professional association," or the abbre	ic," or "Co". A professiona	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u> :	3138 = NORTH	BRT, FC 34288
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_3138.S.	FAN RD BAT, FZ 31789
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		r the name of the
Name of New Registered Agent		
· · · · · · · · · · · · · · · · · · ·	lorida street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j	ed Agent:	
Signature	of New Registered Agent, if cl	nanging

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	PT John D	θος	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
<u>X</u> Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	AMBO.	CADMEDIA HOLDINGLIC	
Add Remove		,	PLONTA GORDA, FR. 3395
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).	cles, enter change(s) here: (Be specific)
	
·	
	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	· · · · · · · · · · · · · · · · · · ·
	·

The date of each amendment(s) adoption:	1/18/19	, if other than the
date this document was signed.	, <i>(' ' '</i>	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	s not meet the applicable statutory filing requirements, of State's records.	this date will not be listed as the
Adoption of Amendment(s) (9	CHECK ONE)	
The amendment(s) was/were adopted by t by the shareholders was/were sufficient for	he shareholders. The number of votes east for the amen or approval.	dment(s)
	the shareholders through voting groups. The following ing group entitled to vote separately on the amendment(
"The number of votes east for the ar	nendment(s) was/were sufficient for approval	
by		
(voting group)	
☐ The amendment(s) was/were adopted by t action was not required.	he board of directors without shareholder action and sha	ireholder
☐ The amendment(s) was/were adopted by t action was not required.	he incorporators without shareholder action and shareho	older
Dated <u>2/4//9</u>	<u> </u>	
	7/	
Signature	resident or other officer - if directors or officers have no	at hann
	neorporator – if in the hands of a receiver, trustee, or other	
	ary by that fiduciary)	
	2 . / / 2	
	(Typed or printed name of person signing)	
	(Typed or printed name or person signing)	
	(Title of person signing)	