P17 0000 78114

| (Reques | stor's Name) | | |
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| PICK-UP | WAIT | MAIL | |
| (Busine | ss Entity Name) | | |
| (Document Number) | | | |
| Certified Copies | Certificates of | Status | |
| Special Instructions to Filing Officer: | | | |
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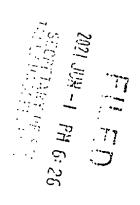
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Advanced Painting & Weterproofing Inc | | | | |
|--|--|--|--|--|
| DOCUMENT NUMBER: P170000 78/14 | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| Name of Contact Person | | | | |
| Advanced Painting @ Water proofing Inc. | | | | |
| 140 Black (rowelingle Address | | | | |
| Daytona Beach FL 32119 City/ State and Zip Code | | | | |
| E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| Name of Contact Person at (386) 316-032 Area Code & Daytime Telephone Number | | | | |
| | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | |
| S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed) | | | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

EILED

of

| Advanced Printing & Waterproof: | Filed with the Florida Dept. of State) 11 6: 26 |
|--|--|
| (Name of Corporation as currently | filed with the Florida Dept. of State) |
| P17000078114 | MESSIMEDLES, ES |
| (Document Number of C | Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Flits Articles of Incorporation: | orida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| MA | The new |
| name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered." "professional association," or the abbreviation "P.A." | mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | NA |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | NA |
| D. If amending the registered agent and/or registered office address: | ss in Florida, enter the name of the |
| Name of New Registered Agent VA | |
| (Florida stree | st address) |
| (Florida Siree | 4 tuuress) |
| New Registered Office Address: | , Florida |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with | |
| Signature of New Rep | gistered 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.

| X Change | PT John Doe | |
|-------------------------------|----------------------------|--|
| X Remove | <u>V</u> <u>Mike Jones</u> | |
| <u>X</u> Add | SV Sally Smith | |
| Type of Action (Check One) | <u>Title</u> Name | <u>Addres</u> s |
| 1) Change | UP John Paone | |
| Add Remove | Gertrude moore | Portorange FL 3419 |
| 2) Change | VP FEMOY | 140 Black Crone Circle Donytena Beach, FL 3119 |
| Remove 3) Change | • | |
| Add | | |
| Remove | | |
| 4) Change | | |
| Add | | |
| Remove | | |
| 5) Change | | |
| Add | | |
| Remove | | |
| 6) Change | | · |
| Add | | |
| Remove | | |

| | eets, if necessary). (E | | | | |
|------------------|---|--|---------------------|--|------|
| NA | | | | | |
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| f an amendment p | rovides for an exchangelementing the amenda | ge, reclassification | on, or cancellation | <u>n of issued shares.</u> Idment itself: | 1 |
| (if not applicat | ble, indicate N/A) | Activition Comme | | | |
| NA | | | | | |
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| The date of each amendment(s) adoption: | 4-21-21 | , if other than the |
|--|---|---|
| date this document was signed. | | |
| Effective date if applicable: | 4-21-21 | |
| | 4-21 一人 (no more than 90 days after amend | ment file date) |
| Note: If the date inserted in this block doe document's effective date on the Department | | g requirements, this date will not be listed as the |
| Adoption of Amendment(s) | CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by action was not required. | the incorporators, or board of directors v | vithout shareholder action and shareholder |
| The amendment(s) was/were adopted by the shareholders was/were sufficient f | | east for the amendment(s) |
| ☐ The amendment(s) was/were approved by must be separately provided for each vot | | - |
| "The number of votes east for the a | mendment(s) was/were sufficient for ap | proval |
| by | | ,,, |
| (| (voting group) | |
| selected, by an i | resident or other officer – if directors or neorporator – if in the hands of a receiving by that fiduciary) | |
| •• | (Typed or printed name of person sig | |
| | | ning) |
| | President (Title of person signing) | |
| | (Title of person signing) | |