P17000087536

-		
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	- #)
(0)		,
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
`	,	,
/De	ocument Number)	<u></u>
(DC	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: OLP Painting Co	rp	
	BER: P17000087536		
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Oscar L Lopez-Pupo		
		Name of Contact Person	n
	O L P Painting Corp		
		Firm/ Company	
	1463 NW 70 ST		
		Address	
	Miami, FL 33147		
		City/ State and Zip Cod	e
oscar	lopezpupo@gmail.com		
		sed for future annual report	notification)
	(64 4	and annual community	notified the state of the state
For further information	n concerning this matter, pleas	se call:	
Oscar I Lopez-Pupo		at (818-6994
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
	endment Section sion of Corporations		ment Section on of Corporations
	Boy 6327		Ruilding

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

O L P Painting Corp				·	
(Name of	Corporation as currently	filed with the Florida Dep	ot. of State)		
P17000087536					
	(Document Number of C	Corporation (if known)	****		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this <i>F</i>	lorida Profit Corporation a	dopts the fo	llowing amendment(s) to	
A. If amending name, enter the new nam	e of the corporation:				
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio	ion "Corp," "Inc," or "C	o". A professional corpor	orated" or ration name	The new the abbreviation must contain the	
B. Enter new principal office address, if a	annlicable:	1463 NW 70 ST			
(Principal office address MUST BE A STR					
			·		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF			***		
D. If amending the registered agent and/onew registered agent and/or the new r		ss in Florida, enter the nai	me of the		
Name of New Registered Agent				<u> </u>	
]4	463 NW 70 ST				
(Florida str		t address)			
<u>New Registered Office Address:</u>	iami 		_, Florida	147	
	(0	City)		(Zip Code)	
New Registered Agent's Signature, if char I hereby accept the appointment as registere	n <mark>ging Registered Agent:</mark> od agent. I am familiar wii	th and accept the obligation	is of the pos	ition.	

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>	<u>John Da</u>	<u>ne</u>		
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>ones</u>		
<u>X</u> Add	<u>SV</u>	Sally Sr	nith		
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					
4) Change Add					
Remove					
5) Change		_		<u></u>	
Add					
Remove					
6) Change		_			
Add					
Remove					

					
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				··· -\	
an amendment provides for an excl				es,	
orovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contai	ined in the amen	dment itself;		
(9 4//					
				···	

	11/07/2017	
The date of each amendment(s)	doption:	, if other than the
date this document was signed.		
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 D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmer ufficient for approval.	nt(s)
☐ The amendment(s) was/were apmust be separately provided fo	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
■ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	lder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
11/07//20	17	
Dated		
a. V		
Signature Y	frector, president or other officer – if directors or officers have not bee	
	id, by an incorporator – if in the hands of a receiver, trustee, or other co	
	ited fiduciary by that fiduciary)	
	Oscar L Lopez-Pupo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	