## P180000 17469

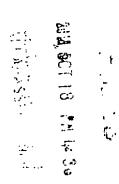
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## <u>COVER LÊTTER</u>

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION:	YOU, CORP		$J_1$
DOCUMENT NUMI	P18000017469			.•
The enclosed Articles	of Amendment and fee are so	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	GLAUCIA BASTOS			
	*	Name of Contact Perso	on	
THE TRUST CIRCLE SERVICES, LLC				
		Firm/ Company		
	1001 EAST SAMPLE ROA			
		Address		
	POMPANO BEACH FLOR	RIDA 33064		
		City State and Zip Cod	le	
ATE	NDIMENTO@THETRUSTO	CIRLCLE.INFO		
	E-mail address; (to be u	sed for future annual report	t notification)	
	. ,.			
for further information	n concerning this matter, pleas	se call:		
GLAUCIA BASTOS		954 at (	8647884	
Name of Contact Person		Area Co	ode & Daytime Telephone Number	
inclosed is a check to	or the following amount made	payable to the Florid <u>a Dep</u>	artment of State:	
■ \$35 Filing Fee	□\$43.75 Fifing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section		Street Address Amendment Section		
Amendment Section Division of Corporations		Division of Corporations		
P.O. Box 6327		Clifton Building		
Tall	ahassee, FL 32314	2661 Executive Center Circle		
		Tallah	assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

JM PAINTING 4 YOU, CORP

(Name of Corporation as currently	filed with the Florida Dept. of State)	-	CÚ.	• •
P18000017469		3	-•	Ų,
(Document Number of C	orporation (if known)			
Pursuant to the provisions of section $607.1006$ , Florida Statutes, this $Fi$ its Articles of Incorporation:	orida Profit Corporation adopts the foll	lowing añ	nendmen	f(s) to
A. If amending name, enter the new name of the corporation:				
		//h	e 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	$r^*$ . A professional corporation name i			
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 <u>MAY BE A POST OFFICE BOX</u> )				
			<del></del>	
D. If amending the registered agent and/or registered office addres	ss in Florida, enter the name of the			
new registered agent and/or the new registered office address:				
Name of New Registered Agent				
O lovida strev	t address)			
New Registered Office Address:	Florida			
A.	'av)	(Zip Code	′)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent—I am familiar wi	th and accept the obligations of the post.	tion,		
Signature of New Reg	gistered 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: <u>X</u> Change	PT Joh	n Doc	
X Remove	V Mik	kę Jones	
X Add	<u>SV</u> <u>Sall</u>	l <u>y Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	Karen C G Rios Guimaraes	820 Tivoli Circle 102
X Add			Deerfield Beach FL 33441
Remove			- · · · · ·
2) Change			
Add			
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change	<del></del>		
Add			
Remove			

Attach additional sheets, if necessary)	icles, enter change(s) here: (Be specific)	
	<del></del>	
<del></del>		
f an amendment provides for an excl	nange, reclassification, or can	cellation of issued shares,
provisions for implementing the ame (if not applicable, indicate V.1)	nament ii not containea iii an	e amenoment usen:

The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amer by the shareholders was/were sufficient for approval.	idment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"  rooting groups	
evoling groups	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and sh action was not required.	areholder
☐ The amendment(s) was were adopted by the incorporators without shareholder action and shareholder action was not required.	older
10/10/2019	
Signature  (By a director, president or other officer—if directors or officers have n selected, by an incorporator—if in the hands of a receiver, trustee, or ot appointed tiduciary by that tiduciary)	ot been her court
JONES C GUIMARAEL JR	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	