P180000 28629

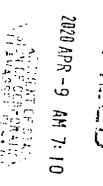
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APR 21 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: D.R. MISSION RI	EMODELING INC	
DOCUMENT NUMB			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
1	DARWIN GARCIA		
•		Name of Contact Person	1
-		Firm/ Company	
•	7810 FELICE AVE		
	ΓΑΜΡΑ FL 33614	Address	
-	<u> </u>	City/ State and Zip Code	2
1	DRMISSIONREMODELING	•	
-		sed for future annual report	notification)
For further information DARWIN GARCIA	concerning this matter, plea	se call:	531-4977
Name o	f Contact Person)
Enclosed is a check for	the following amount made		•
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation \mathbf{of}

D	R	M	1221	ION	RF	MΩ	DE	LING	INC
L.		1 4			1 \ 11	•			1111

(Name of Corporation as cur	rently filed with the Flo	orida Dept. of State)	
P18000028629			
(Document Num	ber of Corporation (if kn	own)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this <i>Florida Profit Corp</i>	poration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporatio	o <u>n:</u>		
CASA COATINGS, INC		The new	
name must he distinguishable and contain the word "corporation" Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation ".	". A professional corp	rporated" or the abbreviation "Corp."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office address.		er the name of the	
Name of New Registered Agent	·		
(Flavi	ida street address)		
	aa sireet aaaress)		
New Registered Office Address:	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	sgent: iliar with and accept the		
Signature of N	ew Registered Agent, if a	hanging	
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.

Example:

X Change	PT	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			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	_
Add			
Remove			
6) Change			_
Add			
Remove			

	mending or adding additional Arti sch additional sheets, if necessary).	(Be specific)	
	3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			
			-
			· · · · · · · · · · · · · · · · · · ·
			
		····	
			<u> </u>
			· <u>-</u>
lf ar	a amendment provides for an evol	hange, reclassification, or cancellation of issued shares,	
	existence of the same of the same	endment if not contained in the amendment itself:	
pro	(if not applicable, indicate N/A)	and the distribution of the distribution (15th).	
pro			
pro	,		
pro			

The date of each amendment date this document was sign	ent(s) adoption:, if other than t
·	
Effective date if applicable	e:
Note: If the date inserted document's effective date of	in this block does not meet the applicable statutory filing requirements, this date will not be listed as to the Department of State's records.
Adoption of Amendment	s) (<u>CHECK ONE</u>)
☐ The amendment(s) was/action was not required.	were adopted by the incorporators, or board of directors without shareholder action and shareholder
	were adopted by the shareholders. The number of votes cast for the amendment(s) /were sufficient for approval.
☐ The amendment(s) was/ must be separately pro-	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):
"The number of v	otes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
04 Dated	07/2020
Signature	Som Cour
<i>Sig.</i>	(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)
	DARWIN GARCIA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)