

P1800003/921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

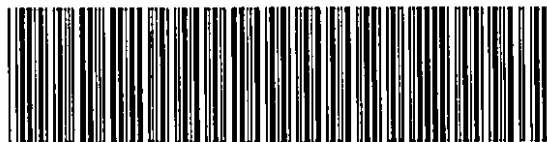
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JUL 31 2018
S. YOUNG

FILED
18 JUL 30 AM 10:13
STATEMENT OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2018

FRANCISCO LOPEZ
MIMI'S PAINTING, INC
1031 SE 9TH STREET UNIT 15
CAPE CORAL, FL 33990

SUBJECT: AMAYA MAINTENANCE, INC.
Ref. Number: P18000031921

We have received your document for AMAYA MAINTENANCE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

MIMI'S PAINTINGS, INC - P04000070233

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 518A00009129

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AMAYA MAINTENANCE, INC.

DOCUMENT NUMBER: P18000031921

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANCISCO LOPEZ

Name of Contact Person

AMAYA MAINTENANCE, INC.

Firm/ Company

1031 SE 9TH ST. UNIT 15

Address

CAPE CORAL, FL 33990

City/ State and Zip Code

KENSHIN1527@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCISCO LOPEZ

at (754)

423-5349

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing 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
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

Articles of Amendment
to
Articles of Incorporation
of

AMAYA MAINTENANCE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000031921

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

PACOSS PAINTING, INC.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1031 SE 9TH ST, UNIT 15

CAPE CORAL

FL 33990

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1031 SE 9TH ST, UNIT 15

CAPE CORAL

FL 33990

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

FRANCISCO LOPEZ

1031 SE 9TH ST, UNIT 15

(Florida street address)

New Registered Office Address:

CAPE CORAL

(City)

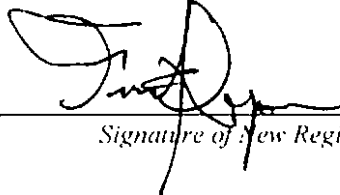
Florida

(Zip Code)

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TALLAHASSEE, FLORIDA

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>FRANCISCO LOPEZ</u>	<u>1031 SE 9TH ST, UNIT 15</u>
<input checked="" type="checkbox"/> Add			<u>CAPE CORAL</u>
<input type="checkbox"/> Remove			<u>FL 33990</u>
2) <input checked="" type="checkbox"/> Change	<u>S</u>	<u>DAIRO H. AMAYA</u>	<u>4245 CORONADO PKWY</u>
<input type="checkbox"/> Add			<u>CAPE CORAL</u>
<input type="checkbox"/> Remove			<u>FL 33904</u>
3) <input type="checkbox"/> Change	<u>VP</u>	<u>CRISTIAN G. MARTINEZ ORTIZ</u>	<u>2055 BRAMAN AVE</u>
<input type="checkbox"/> Add			<u>FORT MYERS</u>
<input checked="" type="checkbox"/> Remove			<u>FL 33901</u>
4) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
5) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>
6) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>

(Attach additional sheets, if necessary). (Be specific)

[illegible]

(if not applicable, indicate N/A)

FRANCISCO LOPEZ 90 %

07/27/2018

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

07/27/2018

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, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____,"
(voting group)

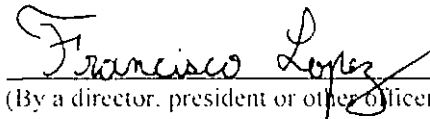
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

04/27/2018

Dated _____

Signature



(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)

FRANCISCO LOPEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)