## P180000043633

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2018 DEC -3 PH 4: 31
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DEC 10 2018

## · COVER LETTER

TO: Amendment Section

POUR DEC -3 PH 4:31 Division of Corporations NAME OF CORPORATION: 2 COATS T-CON CORP DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANDREA MEISTER Name of Contact Person 2 COATS T-CON CORP Firm/ Company 3246 N POWERLINE RD Address POMPANO BEACH FL 33069 City/ State and Zip Code 2 coats @ ton painting 1 com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANDREA MEISTER Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	of	2
2 COATS T-CON CORP		F. 60
(Name)	of Corporation as currently filed with the Florida Dept. of State)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
P18000043633		To the last
	(Document Number of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the fo	llowing amendin
A. If amending name, enter the new na	ame of the corporation:	
		The nev
B. Enter new principal office address, (Principal office address MUST BE A S  C. Enter new mailing address, if applicating address MAY BE A POST	if applicable: TREET ADDRESS )  cable: OFFICE BOX)	
<ul> <li>If amending the registered agent an new registered agent and/or the new</li> </ul>	d/or registered office address in Florida, enter the name of the vegistered office address:	
Name of New Registered Agent	ANDREAMEISTER	
Name of New Registered Agent	3246 N POWERLINE RD	
	(Florida street address)	
New Registered Office Address:	POMPANO BEACH FL , Florida 33	069
	(City)	(Zip Code)
New Registered Agent's Signature, if c	POMPANO BEACH FL , Florida 33  (City)	(Zip Code)

Messer 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.

X Change	<u>PT</u>	John Do	<u>oc</u>			
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Si	m <u>ith</u>			
Type of Action (Check One)	Title		Name	<u>Addres</u> s		
1) Change	VP		GABRIEL AMARAL	22195 SW 65TH TER		
Add				BOCA RATON FL 33426		
X Remove						
2) Change		_				
Add						
Remove				<del></del>		
3 ) Change		<del></del>				
Add						
Remove						
4) Change						
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change						
		_				
Add						
Remove						

. 1	(Be specific)
NA	
7* 173	
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If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	rements, 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 by the shareholders was/were sufficient for approval.	he amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame	
"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 action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
Dated	
Signature Maka Meister	
(By a director, president or other officer - if directors or officers	
selected, by an incorporator – if in the hands of a receiver, truste	ee, or other court
appointed fiduciary by that fiduciary)	
Andrea Meister (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President (Title of person signing)	
(Title of person signing)	