## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380 🖣

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.

Account Number : 104512000707 Phone : (305)803-2736 Fax Number : (305)646-1527

\*\*Enter the email address for this ousiness entity to be used for future annual report mailings. Enter caly one email address please.\*\*

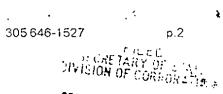
Email Address:\_

COR AMND/RESTATE/CORRECT OR O/D RESIGN TOOLS, LIGHTING AND PAINTING SUPPLES, CORP.

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Electronic Filing Menu

Corporate Filing Menu



## Articles of Amendment Articles of Incorporation

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|---|--|---|
| TOOLS, LIGHTING   | AND PAINTING SUPPLIE                         | ES, CORP.   |
| (Name of Corporation 2  | s currently filed with the F                 | lorida Dept. of State)  |
|   | P18000062624                                 |   |
| (Document   | Number of Corporation (if k                  | (מעיסת  |
| Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:  | tutes, this Florida Profit Co                | rporation adopts the following amendment(8)   |
| A. If amending name, enter the new name of the corpor   | ration:                                      |   |
| name must be distinguishable and contain the word "c<br>"Corp.," "Inc.," or Co.," or the designation "Corp.," "!<br>word "chartered," "professional association," or the abbr | Inc." or "Co". A professio                   | The new or "incorporated" or the abbreviation and corporation name must contain the |
| B. Enter new principal office address, if applicable:<br>(Principal office address MUST BE A STREET ADDRES  | <u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u> |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)   |  | `   |
| (2000)  |  |   |
| D. If amending the registered agent and/or registered of new registered agent and/or the new registered office  | ffice address in Florida, en<br>e address:   | ter the name of the   |
| Name of New Registered Agen:  |  |   |
|   | Florida street address;                      | 71  |
| Nov. Registered Office Address:   |  | , Florida   |
|   | (City)                                       | (Zlp Code)  |
| New Registered Agent's Signature, if changing Registered liberals as registered agent. I am   | ed Agent:<br>familiar with and accept the    | obligations of the position.  |
| Signatura   | of New Registered Agent if                   | chmaina   |

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; Y = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officeridirector 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, Saily Smith is named the V and S. These should be noted as John Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

| X Change                      | PT John                | Doc             |                           |
|-------------------------------|------------------------|-----------------|---------------------------|
| X Ranove                      | Y Mike                 | Jones           |                           |
| _X Add                        | <u>SV</u> <u>Salty</u> | Smith           |                           |
| Type of Action<br>(Check One) | Title                  | Name            | <u>Address</u>            |
| 1) Change                     | P                      | ANA M. PISKUNOV | 17000 N.E. 14 AVE. #109   |
| XAdd                          |                        |                 |                           |
| Remove                        |                        |                 | N. MIAMI BEACH, FL. 33162 |
| 2) Change                     |                        |                 |                           |
| Add                           |                        |                 |                           |
| Remove                        |                        |                 |                           |
| 3 1 Change                    |                        |                 |                           |
| Add                           |                        |                 |                           |
| Remove                        |                        |                 |                           |
| 4) Change                     |                        |                 |                           |
| Add                           |                        |                 | <del></del>               |
| Remove                        |                        |                 |                           |
| 51 Change                     |                        |                 |                           |
| Add                           |                        |                 | <del></del>               |
| Remove                        |                        |                 |                           |
| δ)Change                      |                        |                 |                           |
| Add                           |                        |                 |                           |
| Remove                        |                        |                 |                           |

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| provisions for implementing the amen  | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself; |
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| provisions for implementing the amen  | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself; |

| The date of each amendment(s) adoption date this document was signed.                  | n:   | , if other than the                |
|--|--|------------------------------------|
| Effective date if applicable:  |  |                                    |
|  | (no more than 90 days after amendment file date)   | ******                             |
| Note: If the date inserted in this block didocument's effective date on the Department | oes not meet the applicable statutory filing requirements, then; of State's records.   | nis date will not be listed as the |
| Adoption of Amendment(s)   | (CHECK ONE)  |                                    |
| The amendment(s) was/were adopted by the shareholders was/were sufficient              | y the shareholders. The number of votes east for the amendate for approval.  | ecut(s)                            |
| The amendment(s) wastwere approved must be separately provided for each v              | by the shareholders through voting groups. The following state-<br>toting group entitled to vote separately on the amendment(s):                         | riement<br>:                       |
| "The number of votes cast for the  | amendment(s) was/were sufficient for approval  |                                    |
| by   | ,11  |                                    |
|  | (voting group)   |                                    |
| ☐ The amendment(s) was/were adopted by action was not required.                        | y the board of directors without shareholder action and sharel   | holder                             |
| ☐ The amendment(s) was/were adopted by action was not required.                        | y the incorporators without shareholder action and shareholde  | er                                 |
| 07/26/2018<br>Dated  |  |                                    |
| (By a director, selected, by an  | president other officer - if directors or officers have not be incorporated - if in the hands of a receiver, trustee, or other kilary by that fiduciary) | cont.                              |
| EDUA   | RDO J. CACERES   |                                    |
|  | (Typed or printed name of person signing)  |                                    |
| DIREC  | CTOR & PRESIDENT   |                                    |
|  | (Title of person signing)  | ·                                  |