P180000 93424

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PAINTING AND	D COLORS SOLUTION, I	NC.
DOCUMENT NUMBER: P18000093424		
The enclosed Articles of Amendment and fee are		
Please return all correspondence concerning this n		
ALVAREZ ORTEGA, AS	NEL	
	Name of Contact Pers	on
PAINTING AND COLORS		
	Firm/ Company	
513 SE 7TH ST	. ,	
	Address	
CAPE CORAL, FL 33990		
	City/ State and Zip Co	de
ASNELIN16202@HOTMAIL.CC	DM	
E-mail address: (to be t	sed for future annual repor	t notification)
For further information concerning this matter, plea	se call:	
ALVAREZ ORTEGA, ASNEL	786 at (389-3354 ode & Daytime Telephone Number
Name of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for the following amount made		
S35 Filing Fee S43.75 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		Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PAINTING AND COLORS SOLUTION, INC

	· · ·	• •
(Name of Corporat	ion as currently filed with the Florida Dept.	of States
P18000093424		
	2013 HAY	16 P 3: 18 b
(Docur	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corporation ado	pts the following amendmen
A. If amending name, enter the new name of the co)rporation:	
name must be distinguishable and contain the wor. "Corp.," "Inc.," or Co.," or the designation "Corp.	d Tannania II II	The new
"Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the		ted" or the abbreviation on name must contain the
3. Enter new principal office address, if applicable	:	
Principal office address MUST BE A STREET ADD	PRESS)	
	-	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
. If amending the registered agent and/on registered	1 .00	
. If amending the registered agent and/or registere new registered agent and/or the new registered o	dice address in Florida, enter the name o	<u>f the</u>
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address;	,	
Super Sw. Office Address.	(City) . Flo	orida
	1999	(Zip Code)
my Davistana d. a. a. a. a.		
w Registered Agent's Signature, if changing Regist ereby accept the appointment as registered agent. It	tered Agent:	
Transmit as regimered agem. Te	m jamitiar with and accept the obligations of t	he position,
Signatu	ire of New Registered Agent, if changing	

(Attach additional sh Please note the office P = President; V= V Executive Officer; Ci held. President, Treas Changes should be no a change, Mike Jones	eets, if nece, or/director to fice Preside. FO = Chief surer, Directoted in the fice leaves the	ssary) itle by the first letter of the office title: nt; T= Treasurer; S= Secretary; D= Director; TR Financial Officer. If an officer/director holds me tor would be PTD. following manner. Currently John Don in line of the	Ticer/director being removed and title, name, and R= Trustee; C = Chairman or Clerk; CFO = Chiefore than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is ese should be noted as John Doe, PT as a Change,
X Remove	Y	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	ALVAREZ ORTEGA, ASNEL	513 SE 7TH ST
$\frac{X}{Add}$			CAPE CORAL, FL 33990
Remove			
2) Change	P	ALVAREZ, ASNEL	
Add			
X Remove			
3) Change			
Add			
Remove			
4) Change	 .		
Add			
Remove			
51 (7)			
5) Change			
Add			
Remove			
6) Change			
Add			

Remove

Attach additional sheets, if necessary). (Be sp		
· · · · · · · · · · · · · · · · · · ·		
an amendment provides for an exchange, rec	ssification or our called a second of	
	of contained in the amendment itself:	
(if not applicable, indicate N/A)	the unionalities (13CH).	
	-	

The date of each amendment(s) adoption: date this document was signed	han the
Effective date if applicable:	
ino 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 document's effective date on the Department of State's records.	as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east 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.	
5/10/19	
Dated	
Signature	
(By a director president of 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)	
ALVAREZ, ASNEL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	