P19 000045000

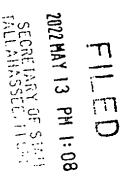
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COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: __COLEGA PAINTING INNOVATION CORP P19000045000 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **DELIA JIMENEZ FIGUERAS** Name of Contact Person JIMENEZ ACCOUNTING OF WPB INC Firm/ Company 3676 COLLIN DR, STE 8 Address WEST PALM BEACH, FL 33406 City/ State and Zip Code JIMENEZ TAX@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

DELIA JIMENEZ FIGUERAS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	of		79
COLEGA PA	AINTING INNOVATION CORP	ALL A	72 HA
(Name of Corpora	tion as currently filed with the Flor	rida Dept. of State	
F	P19000045000	\(\frac{1}{2}\)	n ω
(Docu	ument Number of Corporation (if kno	own)	유 교 (
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this <i>Florida Profit Corpe</i>	oration adopts the follog	wing apiendn
A. If amending name, enter the new name of the	corporation:		
COLEGA PAIN	TING & LANDSCAPING CORP		The ne
name must be distinguishable and contain the word "a" inc" or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abbi	c." or "Co". A professional corpe		
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Better address) D. If amending the registered agent and/or registence registered agent and/or the new registered Mame of New Registered Agent	ered office address in Florida, ente	r the name of the	
	(Florida straat address)		
	(Florida street address)		
New Registered Office Address:	(City)	Florida	(ip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	e <u>gistered Agent:</u> I am familiar with and accept the o	bligations of the positio	n.
Sign	nature of New Registered Agent, if ch	nanging	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s.	. 607.0120 (11) (c), 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)

Example:

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 = Chie 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 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				<u>-</u>
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				<u>. </u>
Remove				
5) Change			 	
Add				
Remove				
6) Change				
Add				
Remove				

A THEOTHERS	ng or adding addition: litional sheets, if necess	sary). (Be specifi	c)		
					=
		-			
				·	
					F-13*81-2-8-18-4-4-14-84
					
f an amen	idment provides for a	n exchange, reclas	sification, or cand	ellation of issued s	hares,
<u>provision:</u> (if no:	s for implementing the tapplicable, indicate N	<u>ie amendment if no</u> √A)	et contained in the	e amendment itself	<u>:-</u>
	.,,	,			
 					
	<u></u>	_			

• :

•		March	i 20, 2022		
The date of each and date this document w					, if other than the
Effective date <u>if ap</u> r	olicable:	March 20, 2022			
<u></u>		(no more than 90	days after amendmen.	t file date)	
		ock does not meet the applica partment of State's records.	ble statutory filing re	quirements, this date will	not be listed as the
Adoption of Amend	ment(s)	(CHECK ONE)			
The amendment(s action was not rec		oted by the incorporators, or bo	oard of directors witho	out shareholder action and	shareholder
		oted by the shareholders. The ficient for approval.	number of votes east f	for the amendment(s)	
		roved by the shareholders through		•	
"The numbe	er of votes cast f	or the amendment(s) was/were	sufficient for approv.	al	
by				_,``	
		(voting group)			
Da	M ted	arch 20, 2022			
Sig	nature		Perez Zu		
	selected	ector, president or other office, by an incorporator – if in the diduciary by that fiduciary)			
		Florintino P	erez Zuniga		
	-	(Typed or printed no	ame of person signing)	
		Presid	dent		
	_	(Title of person sign	ing)		