P19000079814

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COVER LETTER

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TO: Amendment Section Division of Corporations	1			
NAME OF CORPORATION: _ D\QZ	Painting Corporation P19000079814			
The enclosed Articles of Amendment and fee are sub				
Please return all correspondence concerning this mat				
_Diaz 1917 Vernau Talbhasse	Name of Contact Person Painting Corporation Firm/ Company BIVD Lot # 20 Address Let 32303 City/ State and Zip Code			
	ed for future admual report notification)			
For further information concerning this matter, pleas	GID 573-1738			
Name of Contact Person	at (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	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is 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	
Diaz F	Painting Corporation	
(Name of Corna	oration as currently filed with the Florida Dept. of State)	
od to a man.	3000079014	
	10000 181	
(De	ocument Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006. Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of th	he corporation:	
	The new	
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," ", "chartered," "professional association," or the a	d "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc.," or "Co". A professional corporation name must contain the word abbreviation "P.A"	
B. Enter new principal office address, if applic	rable:	
(Principal office address MUST BE A STREET)	ADDRESS)	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> </u>	
	70.	
D. If amending the registered agent and/or reg new registered agent and/or the new register	eistered office address in Florida, enter the name of the	i
.	1927	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	Florida (7) Codo	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing	2 Registered Agent:	
I hereby accept the appointment as registered age	ent. I am familiar with and accept the obligations of the position.	
	Signature of New Registered Agent, if changing	
Cheat if applicable		
Check if applicable ☐ The amendment(s) is/are being filed pursuant t	to s. 607.0120 (11) (e), F.S.	
The affectation is the real parameter		

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 = 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 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>			Address
1) Change	D	<u>Gui</u>	lleimo	Gonzalez	1604 Malony St
Add					Tallahassee, FL
Remove	7	ر ۾ ا	T	H hipon	<u>32310</u> 1 932 Miles et
2) Change	\mathcal{D}	LOY	en E	<u>, [[21](</u> 241)	L CX WITE 301
Add					Tallahassee, tr 32310
Remove 3) Change					
Add					
Remove					
4) Change				<u> </u>	20 FE
Add					7
Remove					
Add			<u> </u>		
Remove					
6) Change			_		
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
ADD EIN: 843521825			-
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	, 한다. - 프립.	AM II: 30	
(if not applicable, indicate N/A)	VGRED SIVE	ည် မာ :-	٠,,
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The date of each amendment(s) add	ption:	, if other than the
date this document was signed.	•	
Effective date if applicable:		_
	(no more than 90 days after amendment f	ile date)
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirtment of State's records.	airements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adoptaction was not required.	ted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes east for icient for approval.	r the amendment(s)
☐ The amendment(s) was/were appr must be separately provided for e	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the an	following statement nendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	20) 384 7811
by	(voting group)	
selected.	2020 Sector, president or other officer – if directors or office by an incorporator – if in the hands of a receiver, trued tiduciary by that fiduciary) Guedal Ope Doz Logae (Typed or printed name of person signing)	stee, or other court
-	(Title of person signing)	