P20 0000 49865

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2020 AUG 24 PM 1: 09
SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GUACAMAYA I	PAINTING INC		
DOCUMENT NUM	IBER: P20000049865			
The enclosed Article	s of Amendment and fee are so	ibmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	Samy Valladares			
		Name of Contact Per	rson	
	GUACAMAYA PAINTING INC			
		Firm/ Company		
	22035 SW 113 PL			
		Address		
	MIAMI, FL 33170			
		City/ State and Zip C	ode	
	guacamayapaint@gmail.com	l		
	E-mail address: (to be u	sed for future annual rep	ort notification)	
For further information	on concerning this matter, plea	se call: 786 at (314-1892	
Name of Contact Person			Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida D	epartment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Ame Divis The 241	et Address endment Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303	

Articles of Amendment FILED to Articles of Incorporation 2020 AUG 24 PM 1: 09 oration as currently filed with the Florida Denter States RY OF STAIL TALLAHASSEE, FL (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida (City)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

New Registered Agent's Signature, if changing Registered Agent:

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.

Example:

X Change	PT	John Doe	
\underline{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	VP	WILSON ALVAREZ	26720 SW 142ND AVE
X Add			APT 301
Remove			HOMESTEAD, FL 33032
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(i) Change			
Add			
Remove			

	(Be specific)	
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If an amendment provides for an excha	nge, reclassification	<u>, or cancellation of iss</u> ued shares,
provisions for implementing the amend	nge, reclassification Iment if not contain	or cancellation of issued shares, ed in the amendment itself:
(if not applicable, indicate N/A)	nge, reclassification Iment if not contain	, or cancellation of issued shares, ed in the amendment itself:
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(if not applicable, indicate N/A)	nge, reclassification Iment if not contain	or cancellation of issued shares, sed in the amendment itself:

	N/A	
The date of each amendment		if other than the
date this document was signed		
Effective date if applicable:	8/18/2020	
<u></u>	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendare sufficient for approval.	nent(s)
☐ The amendment(s) was/were must be separately provided	e approved by the shareholders through voting groups. The following st d for each voting group entitled to vote separately on the amendment(s):	alement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	•	
,	(voting group)	
08/180 Dated	2020 .	
(By sel	a director, president or other officer – if directors or officers have not be ected, by an incorporator – if in the hands of a receiver, trustee, or other pointed fiduciary by that fiduciary)	een court
	SAMY VALLADARES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	