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SECRETATION OF STATE
TALLAPPASSEE, FL

2023 MAY -8 AH IO: 5

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: JS MOLINA PAIN	TING SERVICES INC.			
DOCUMENT NUM	BER: P20000056930				
	of Amendment and fee are su	bmitted for filing.			
Please return all corru	espondence concerning this ma	tter to the following:			
	JOHANNA VELEZ				
		Name of Contact Person	1	_	
		Firm/ Company			
	6340 HYPERION DR			(n)	0.3
		Address			1923
	PORT RICHEY, FL 34668			三二二	⊒ E
		City/ State and Zip Code	<u> </u>		2023 MAY -
	maryvelez826@gmail.com			800	00
		sed for future annual report	notification)		
				QXI ≥	4H 10: 51
For further information	on concerning this matter, plea	se call:		ター単	<u>=:</u>
JOHANNA VELEZ		at (352	de & Daytime Telephone Nur		
Name of Contact Person		Area Co	de & Daytime Telephone Nur	ıber	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
An Div	niling Address nendment Section vision of Corporations D. Box 6327	Amene Divisie	Address Iment Section on of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

IS MOLINA PAINTING SERVICES INC.

JS MOLINAT AUXING SERVICES INC.			
(Name of Corporation as curre	ntly filed with the Florida Do	ept, of State)	
P20000056930			
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	ns Florida Profit Corporation	adopts the follow	ring amendment(s) t
A. If amending name, enter the new name of the corporation:			
		_	Thenew
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.,	A professional corporation	d" or the abbrevia nama must con	ition "Corp.," tain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			2023 P SECR TAL
		_	Einler
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		_	SSET
		_	0: 51 FI FI
D. If amending the registered agent and/or registered office as new registered agent and/or the new registered office addring of New Registered Agent		name of the	
(Florida	street address)		
N		, Florida	
New Registered Office Address:	(City)	_	ip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familio	ent: ar with and accept the obligati	ions of the positio	n.
Signature of Nev	v Registered Agent, if changin	g	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	I+(e), 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)

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	<u>John Doe</u>	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP	ANNER SILVA	6340 HYPERION DR
Add			PORT RICHEY, FL 34668
X Remove			
2) Change			
Add			SF 22
Remove 3) Change			SECRETARY -8 TALLAHUSS
Add			47 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
Remove			- 10 mm
4) Change			AMIO: 51
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

2023 HAY -8 AH 10: 5

	adoption:	, if othe	r than t	ne
date this document was signed.	5/10/2023			
Effective date <u>if applicable</u> :			•	
	tno more than 90 days after amendment file date)			
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	l not be lis	ted as t	he
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were caction was not required.	adopted by the incorporators, or board of directors without shareholder action and	d sharehold	er	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.			
must be separately provided y "The number of votes ca by	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): ast for the amendment(s) was/were sufficient for approval (voting group) (voting group) a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court officer by that tiduciary) JOHANNA VELEZ (Typed or printed name of person signing)	SECRETACC OF STATE TALLAHASSEE, FL	2023 MAY -8 AN IO: 51	
	PRESIDENT			
	(Title of person signing)		-	