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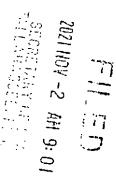
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Painting by Brett DOCUMENT NUMBER: P2100058370 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: eborch Mered 7th EA Siness Control Service Inc City/ State and Zip Code abusiness controls ervice, net address: (to be used for future annual report notification) For further information concerning this matter, please call: me of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & \$52.50 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

FILED

2021 NOV -2 AM 9: 01

Painting by Bret	rt Inc	SECRETARY OF STAR
(Name of Corporation as currently	filed with the Florida	Dept. of State)
D210000583	19	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporat	ion adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:		
		Thenew
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorpor professional corporat	ated" or the abbreviation "Corp.," ion name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	<u>'ess in Florida, enter ti</u> !	<u>ie name of the</u>
	-	
Name of New Registered Agent		
(Florida str	sat cellrace)	
	eer dan essy	
New Registered Office Address:	(City)	, Florida
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	: with and accept the oblig	gations of the position.
Signature of New R	egistered Agent, if chan	ging
•		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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	<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	\checkmark	John B. Farrington III	2056 Gorda Bella Ave
X_ Add			St. Augustine, FL32086
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necesso	l Articles, enter chang ary). (Be specific)			
				 _
			-	
	<u> </u>			
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				· · · · · · · · · · · · · · · · · · ·
				
				
	_		<u> </u>	
f an amendment provides for at	<u>a exchange, reclassific</u>	a <u>tion, or cancellati</u>	ion of issued share	<u>5,</u>
provisions for implementing the	e amendment if not co	ntained in the amo	endment itself:	
(if not applicable, indicate N	/A)			
			<u> </u>	·
				<u> </u>

The date of each amendment(s) adopt	ion:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, thi ment of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment for approval.	ent(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting groups. The following stath voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated 10/27/) Coc	
Signature	Hydre	
(By a direct	or, president or other officer - if directors or officers have not b	een
	an incorporator – if in the hands of a receiver, trustee, or other iduciary by that fiduciary)	court
_F	3rett Mrotek (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
·	President	
	(Title of person signing)	