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2021 SEP 15 AH 9: 05 SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Asel Mundial Painting Inc DOCUMENT NUMBER: P21000073849 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Asel Bueno Name of Contact Person Asel Mundial Painting Inc Firm/ Company 8722 N Brook St Address Tampa, FI 33604-1808 City/ State and Zip Code Acel.Bueno68@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 481-3763

Area Code & Daytime Telephone Number Asel Bueno Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

Asel Mundial Painting Inc			
(Name of Corporation as current	ly filed with the Florida Dept. of State)	<u>-</u>	
P21000073849			
(Document Number of	of Corporation (if known)	_	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fo	ollowing amendm	nent(s) to
A. If amending name, enter the new name of the corporation:		The ne	u,
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.	A professional corporation name must	reviation "Corp.,	••
B. Enter new principal office address, if applicable:	8722 N Brook St		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Tampa, Fl 33604-1808		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		2021 SEP 5 SECTIVITIES 13	<u> </u>
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent		## 9: 05	D
			
(Florida si	treet address)		
New Registered Office Address:	. Florida_	(Zip Code)	
	·		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the po	osition.	
Signature of New	Registered Agent, if changing		
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)

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>Y</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			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach <i>additional she</i>	ng additional Artic ets, if necessary).	(Be specific)				
				_		
			<u>-</u>	<u> </u>	•	
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-				<u></u>		
-						
				-		
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an amendment ne	ovides for an excha	nge reclassificat	ion or cancellatio	n of issued shares		
rovisions for impl	ementing the amen	dment if not cont	ained in the amen	idment itself:	1	
(if not applicabl	e, indicate N/A)					
., ,,						
			_ 			
					_ _ _	
						
					<u> </u>	
	·					

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	09/08/2021	16 d d d
The date of each amendment date this document was signed		if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ill not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action an	d shareholder
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by Can	(voting group)	
·	(voting group)	
Dated	9/14/21	
Dated		
Signature	By a director, president or other officer – if directors or officers have not been	
Sc	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Asel Bueno	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	