P21000095973

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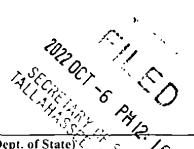


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ΓO: Amendment Section

Division of Corporations	
SAME OF CORPORATION: MARIO PAINT	& REMODELING INC
DOCUMENT NUMBER: P21000095973	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
JAVIER MORALES MOR	ENO
MARIO PAINT & REMO	Name of Contact Person DELING INC
	Firm/ Company
2113 W CLINTON ST	<u> </u>
TAMPA, FL 33604	Address
	City/ State and Zip Code
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
JAVIER MORALES MORENO	at ()
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
S35 Filing Fee Sertificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (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 of



MARIO PAINT & REMODELING IN

(Name of Corp	oration as currently	filed with the Florida De	pt. of State)
P21000095973			
(D	ocument Number of	Corporation (if known)	<u> </u>
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this F	lorida Profit Corporation	adopts the following amendment(s) to
A. <u>If amending name, enter the new name of to</u> MORENO PAINTING & REMODELING I			The new
name must he distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the c	Inc," or "Co". A		" or the abbreviation "Corp"
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>	E BOX)		
D. If amending the registered agent and/or re- new registered agent and/or the new regist		ss in Florida, enter the n	ame of the
Name of New Registered Agent			
	(Florida stree	t address)	
New Registered Office Address:		iiy)	_, Florida (Zip Code)
		,/	(mp cone)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	<mark>t Registered Agent:</mark> ent I am familiar wi	th and accept the obligation	ns of the position.
	Signature of New Reg	istered Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed pursuant	to s. 607.0120 (11) (e). F.S.	

ddress of each Officer Attach additional sheets, Please note the officer/di P = President; V = Vice Executive Officer; CFO = President, Treasurer, Dir Changes should be noted t change, Mike Jones lea Itike Jones, V as Remove	and/or D , if necess rector titl Presidem = Chief F) rector woo in the fo	virector being a sary) le by the first lead; T= Treasurer inancial Officer add be PTD. Illowing manner orporation, Sal	dded: Ter of the office title: S= Secretary: D= Director: TR= T If an officer/director holds more tha Currently John Doe is listed as the V Smith is named the V and S. These	Trustee; C = Chairman or Clerk; CEO = Chief on one title, list the first letter of each office held. PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
Example: X Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
'ype of Action Check One)	<u>Title</u>	<u>Nam</u>		<u>Addres</u> s
) Change				
Add				
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If amending or adding additional Articles,	enter change(s) here:
Attach additional sheets, if necessary). (Be	specific)
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provisions for implementing the amendment	reclassification, or cancellation of issued shares, eat if not contained in the amendment itself:
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no more than 90 days after amendment file	? date)
ote: If the date inserted in this block does not meet the applicable statutory filing require ocument's effective date on the Department of State's records.	rements, this date will not be listed as the
doption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without slaction was not required.	hareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes east for the by the shareholders was/were sufficient for approval.	he amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the amer	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
09/20/2022 Dated	
$\mathcal{V}\mathcal{D}\mathcal{V}$	
Signature	
(By a directory resident or other officer – if directors or officers	
selected, by an incorporator – if in the hands of a receiver, trusted appointed fiduciary by that fiduciary)	e, or other court
JAVIER MORALES MORENO	
(Typed or printed name of person signing)	
PRESIDENT	
(Tide of person signing)	