P220000784355

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
        Division of Corporations
        Fax Number      : (850)617-6380

From:
        Account Name    : WF TAXES AND MORE INC.
        Account Number  : I20200000043
        Phone           : (772)879-0010
        Fax Number      : (772)879-0150
```
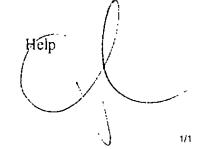
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: wftaxes.office@gmail.com

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COR AMND/RESTATE/CORRECT OR O/D RESIGN
MAGNOLIA PAINTING & SERVICES INC

Certificate of Status	1
Certified Copy	0
Page Count	06
Estimated Charge	$43.75

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MAGNOLIA PAINTING & SERVICES INC

DOCUMENT NUMBER: P22000078435

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAGNOLIA FUENTES SANCHEZ
_____
Name of Contact Person

MAGNOLIA PAINTING & SERVICES INC
_____
Firm/ Company

2540 SE NORMAND ST
_____
Address

STUART, FL 34997
_____
City/ State and Zip Code

wflaxes.office@gmail.com
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAGNOLIA FUENTES SANCHEZ   at (772) 519-7576
_____   _____
Name of Contact Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

■ $35 Filing Fee   ☐ $43.75 Filing Fee &   ☐ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
                      Certificate of Status   Certified Copy   Certificate of Status
                                                 (Additional copy is   Certified Copy
                                                 enclosed)   (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

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Articles of Amendment
to
Articles of Incorporation
of

MAGNOLIA PAINTING & SERVICES INC

_____

(Name of Corporation as currently filed with the Florida Dept. of State)

P22000078435

_____

(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:

_____ *The new*
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."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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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)   (Zip Code)

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

Check if applicable
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)(c), 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 he 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
_X_ Remove	V	Mike Jones
_X_ Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ___ Add X ___ Remove	P	MAGNOLIA FUENTES SANCHEZ	2540 SE NORMAND ST STUART, FL 34997 -
2) ___ Change X ___ Add ___ Remove	P	MAGNOLIA FUENTES VASQUEZ	2540 SE NORMAND ST STUART, FL 34997
3) ___ Change ___ Add ___ Remove			
4) ___ Change ___ Add ___ Remove			
5) ___ Change ___ Add ___ Remove			
6) ___ Change ___ Add ___ Remove			

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E. **If amending or adding additional Articles, enter change(s) here:**
    (Attach additional sheets, if necessary).   (Be specific)

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

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F. **If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**
    (if not applicable, indicate N/A)

_____

_____

_____

_____

_____

_____

_____

_____

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)   **(CHECK ONE)**

☑ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s).*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
                    (voting group)

Dated __12/06/2022_____

Signature __Magnolia Fuentes Sanchez__
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MAGNOLIA FUENTES SANCHEZ
_____
(Typed or printed name of person signing)

PRESIDENT
_____
(Title of person signing)

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