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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SEBAS PAINTIN	G SOLUTIONS CORP	
DOCUMENT NUM	P24000053768		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	DIEGO A PALACIOS AGU	IILAR	
		Name of Contact Person	1
		Firm/ Company	
	2637 FOREST BLVD		
	JACKSONVILLE, FL 32246	Address	
		City/ State and Zip Code	
	DIEGO05SEBAS@GMAIL	.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call:	
DIEGO A PALACIO	S AGUILAR	904 at (5071136 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	S43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SEBAS PAINTING SOLUTIONS CORP

(Name of Cornoration as co	urrently filed with the Florida Dept. of	State)		
P24000053768	arrenty thea will the Florida Dept. or	<u></u> ,		
(Document Nu	mber of Corporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts	the following	; amendn	nenti
A. If amending name, enter the new name of the corporat	ion:			
			The ne	711'
name must be distinguishable and contain the word "corporati "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	Co". A professional corporation name	ne abbreviation	п "Corp.	. "
3. Enter new principal office address, if applicable:				_
Principal office address MUST BE A STREET ADDRESS)		_	
				•
			<u> 8</u>	
F-40			; -	
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)			ch f	
		•		
				
		-		
 If amending the registered agent and/or registered office new registered agent and/or the new registered office a 		f the		
new registered agent and/or the new registered office a	durcas.			
Name of New Registered Agent				
(Flo	orida street address)			
New Registered Office Address:	Flo	orida		
	(City)	(Zip Co	ode)	
ew Registered Agent's Signature, if changing Registered				
hereby accept the appointment as registered agent. I am far	miliar with and accept the obligations of t	he position.		
Signature of	New Registered Agent, if changing			
,;,	and the state of t			
heck if applicable				
The amendment(s) is/are being filed pursuant to s. 607.012	0 (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 De	<u>oe</u>	
X Remove	<u>Y</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	V		LILIANA PARRA CALDERON	2637 FOREST BLVD
X Add				JACKSONVILLE, FL 32246
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				**
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)
	- ·
	
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an amandment provides for an arch	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	THE CONTRIBUTION OF CONTRIBUTION CONTRIBUTIO
	· · · · · · · · · · · · · · · · · · ·

•

	10/10/2024	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	10/2024	
Effective date <u>if applicable</u> :	 	
	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this document's effective date on the D	plock does not meet the applicable statutory filing requireme epartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the a ufficient for approval.	mendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by 1	<u>,•</u>	
	(voting group)	
10/10/202	4	
Dated		
(By i c	irector, president or other officer – if directors or officers haved by an incorporator – if in the hands of a receiver, trustee, outed fiduciary by that fiduciary)	
	DIEGO A PALACIOS AGUILAR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	