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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: DESTINY PAIN	TING SERVICES INC		
	BER: P24000054741			
The enclosed Article.	s of Amendment and fee are si	ubmitted for filing.		
Please return all corre	espondence concerning this ma	atter to the following:		
	LUIS RAMIREZ			
		Name of Contact Perso	 n	
	BEST FINANCIAL SERVI	CES & ASSOCIATES INC		
		Firm/ Company		
	\$800 UNIVERSITY PARKY	• •		
		Address		
	PENSACOLA FL 32514	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		City/ State and Zip Cod	e	
	LUIS@BESTFINANCIALS	SERVICES COM		
		sed for future annual report	natification	
For further informatic	on concerning this matter, plea		572 (04)	
		850 at (_)	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Cl\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address	Street	<u>Address</u>	
	endment Section	Amend	ment Section	
	ision of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

DESTINY PAINTING SERVICES INC (Name of Corporation as currently filed with the Florida Dept. of State) P24000054741 (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; 1. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "vacorporated" 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 BON) 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: MARCOS ARGUETA MANZANARES Name of New Registered Agent 2150 SPENCER RD (Florida street address) ORANGE PARK New Registered Office Address: , Florida_ (Ciry New Registered Agent's Signature, if changing Registered Agent: Phereby 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) (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 PSF and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smah 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	Y	Mike Jones	
\underline{X} Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	MARCOS ARQUETA MANZANARES	2150 SPENCER RD
Add			ORANGE PARK FL 32073
X Remove			
2) Change	P	MARCOS ARGUETA MANZANA RES	2150 SPENCER RD
<u></u> Add			ORANGE PARK FL 32073
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Ĵ) Change	•		
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheet:	s, if necessary).	(Be specific)				
						
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<u>f an amendment provi</u>	<u>des for an excha</u>	inge, reclassificatio	n, or cancellatio	<u>on of issued sha</u>	res.	
<u>provisions for impleme</u>	enting the amen	dment if not conta-	ined in the ame	ndment itself:		
(if not applicable, ii	naicaic N/A)					
- -						_
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	-				·	_

The date of each amendment(s) ad	option;	if other than
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file do	nte)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirem artment of State's records.	ients, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	ted by the incorporators, or board of directors without shar	reholder action and shareholder
1 The amendment(s) was/were adop by the shareholders was/were suf-	ted by the shareholders. The number of votes east for the ficient for approval.	amendment(s)
☐ The amendment(s) was/were appromist be separately provided for e	ived by the shareholders through voting groups. The followich voting group entitled to vote separately on the amenda	wing statement nent(s)
"The number of votes east for	or the amendment(s) was/were sufficient for approval	
by	(voling group)	
	(voting group)	
Dated 8 Signature (By a dire	ctor, president or other officer – if directors or officers have	ve not been
selected,	by an incorporator – if in the hands of a receiver, trustee, c I fiduciary by that tiduciary)	or other court
_	(Typed or printed name of person signing)	12 ANAFES
_	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	