

PA3000045432

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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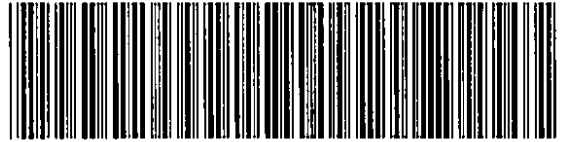
(Business Entity Name)

(Document Number)

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2018 AUG 27 PM 12:35

SECRETARY OF STATE
TALLAHASSEE, FL

R. WHITE

AUG 30 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Regal Custom Painting Inc.

DOCUMENT NUMBER: P93000045432

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

Please return all correspondence concerning this matter to the following:

Craig Lorenzini

Name of Contact Person

Regal Custom Painting Inc.

Firm/ Company

1460 Baytree Dr. NE Suite A

Address

Palm Bay, FL 32905

City/ State and Zip Code

clorenzini@regalcustompainting.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Craig Lorenzini

at (321)

426-5434

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 &
Certificate of Status

☐ \$43.75 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

2018 AUG 27 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FL

Regal Custom Painting Inc.

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

P93000045432

(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)

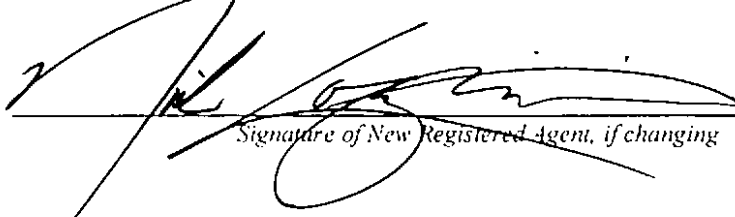
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Nicholas Lorenzini
1460 Baytree Dr. NE Suite A
(Florida street address)

New Registered Office Address: Palm Bay, Florida 32905
(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

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change	<u>P</u>	<u>Nicholas Lorenzini</u>	<u>982 Colonial Ave</u>
<u> </u> Add			<u>Palm Bay, FL. 32909</u>
<u> </u> Remove			
2) <u> </u> Change	<u>S</u>	<u>Angie Cookson</u>	<u>294 Titan Rd</u>
<u>X</u> Add			<u>Palm Bay, FL. 32909</u>
<u> </u> Remove			
3) <u> </u> Change	<u>Officer</u>	<u>John Long</u>	<u>562 N Wickham Rd. Apt 123</u>
<u> </u> Add			<u>Melbourne, FL. 32935</u>
<u>X</u> Remove			
4) <u> </u> Change	<u>P</u>	<u>Kurt Lorenzini</u>	<u>3926 Lakeside Lane</u>
<u> </u> Add			<u>Palm Bay, FL. 32909</u>
<u>X</u> Remove			
5) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
6) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			

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

(Attach additional sheets, if necessary). (Be specific)

[illegible]

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)

[illegible]

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 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 Nicholas Lorenzini, Susan Lorenzini & Craig Lorenzini

(voting group)

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

Dated 08/09/2018 _____

Signature _____

(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)

Craig Lorenzini

(Typed or printed name of person signing)

CFO

(Title of person signing)

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000045432

Entity Name: REGAL CUSTOM PAINTING, INC.

Current Principal Place of Business:

1460 BAYTREE DR NE
SUITE A
PALM BAY, FL 32905

Current Mailing Address:

1460 BAYTREE DR. NE
SUITE A
PALM BAY, FL 32905 US

FEI Number: 59-3203482

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LORENZINI, KURT
1460 BAYTREE DR. NE
SUITE A
PALM BAY, FL 32905 US

294 TITAN RD

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KURT LORENZINI

02/20/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title: PRESIDENT
Name: LORENZINI, KURT NICK
Address: 3926 LAKESIDE LN
City-State-Zip: PALM BAY FL 32909

Title: SD
Name: LORENZINI, MARK
Address: 275 BEECHWOOD DR.
City-State-Zip: CRAWFORDVILLE FL 32327

Title: ~~OFFICER~~
Name: LORENZINI, NICHOLAS R
Address: 982 COLONIAL AVE
City-State-Zip: PALM BAY FL 32909

Title: SD
Name: LORENZINI, JENNIFER
Address: 1640 SUNNY BROOK LN #A201
City-State-Zip: PALM BAY FL 32905

Title: VP
Name: LORENZINI, SUE
Address: 3926 LAKESIDE LANE
City-State-Zip: PALM BAY FL 32909

Title: CFO
Name: LORENZINI, CRAIG
Address: 451 HANSARE ST SW
City-State-Zip: PALM BAY FL 32908

Title: OFFICER
Name: LONG, JOHN
Address: 562 N WICKHAM RD. 123
City-State-Zip: MELBOURNE FL 32935

Title: ~~OFFICER~~
Name: RICHARD, MARIA
Address: 1871 PLAYER CIRCLE S
City-State-Zip: MELBOURNE FL 32935

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG RICHARD LORENZINI

CFO

02/20/2018

Electronic Signature of Signing Officer/Director Detail

Date