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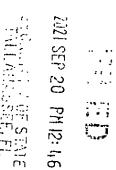
| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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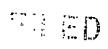
## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPO  | PRATION: Regal Custom Pair                  | iting, Inc.   |  |  |  |
|--|---|---|--|--|--|
| DOCUMENT NUM   | P93000045432                                |   |  |  |  |
|  | s of Amendment and fee are su               | bmitted for filing.   |  |  |  |
| Please return all corr   | espondence concerning this ma               | tter to the following:  |  |  |  |
|  | Craig Lorenzini                             |   |  |  |  |
|  | Name of Contact Person                      |   |  |  |  |
|  | Regal Custom Painting, Inc.                 |   |  |  |  |
|  |   | Firm/ Company   | <del></del>  |  |  |
|  | 1460 Baytree Dr. NF Suite A                 |   |  |  |  |
|  | Address                                     |   |  |  |  |
|  | Palm Bay, FL 32905                          |   |  |  |  |
|  | City/ State and Zip Code                    |   |  |  |  |
|  | clorenzini@regalcustompaint                 | ing.com   |  |  |  |
|  | E-mail address; (to be us                   | sed for future annual report  | notification)  |  |  |
| For further informati  | on concerning this matter, pleas            | se call:  |  |  |  |
| Craig Lorenzini  |   | at (321   | 426-5434   |  |  |
| Name of Contact Person   |   | at ( 321 ) 426-5434  Area Code & Daytime Telephone Number                   |  |  |  |
| Enclosed is a check t  | or the following amount made                | payable to the Florida Depa   | artment of State:  |  |  |
| S35 Filing Fee   | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | ☐\$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |  |  |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |   | Amend<br>Divisio<br>The Co  | Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810            |  |  |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



|  | 2021 SEP 20 PH 12: 1.6   |
|--|--|
| (Name of Corporation as curren   | LUZI SEP 20 Pri 12: 46 utly filed with the Florida Dept. of State)   |
| 93000045432  | D. Ali i ge state  |
| (Document Number   | of Corporation (if known)  |
| ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:   | s Florida Profit Corporation adopts the following amendment  |
| . If amending name, enter the new name of the corporation:   |  |
| 7/A  | The new  |
| ame must be distinguishable and contain the word "corporation,"<br>Inc.," or Co.," or the designation "Corp," "Inc," or "Co",<br>chartered," "professional association," or the abbreviation "P.A.   | "company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word |
| . Enter new principal office address, if applicable:   | N/A  |
| Principal office address MUST BE A STREET ADDRESS )  |  |
|  |  |
|  |  |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | N/A  |
| 3  |  |
|  |  |
|  |  |
| . If amending the registered agent and/or registered office address new registered agent and/or the new registered office address  |  |
| The state of the s | <del></del>  |
| N/A  |  |
| Name of New Registered Agent N/A   | · · · · · · · · · · · · · · · · · · ·  |
| Name of New Registered Agent   | the set address.   |
| Name of New Registered Agent   | trect address)   |

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)

Example:

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.

| X Change                      | <u>L.L.</u> | John Doc           |                    |
|-------------------------------|-------------|--------------------|--------------------|
| X Remove                      | <u>V</u>    | Mike Jones         |                    |
| X Add                         | <u>sv</u>   | Sally Smith        |                    |
| Type of Action<br>(Check One) | Title       | Name               | <u>Addres</u> s    |
| 1) Change                     | S           | Angie Cookson      | 294 Titan Rd       |
| Add                           |             |                    | Palm Bay, FL 32909 |
| Remove  2) Change             | <u>s</u>    | Angelina Lorenzini | 294 Titan Rd       |
| X Add                         |             |                    | Palm Bay, FL 32909 |
| Remove 3 ) Change             |             | _                  |                    |
| Add                           |             |                    |                    |
| Remove                        |             |                    |                    |
| 4) Change                     |             | _                  | <del>-</del>       |
| Add                           |             |                    |                    |
| Remove                        |             |                    |                    |
| 5) Change                     |             |                    |                    |
| Add                           |             |                    |                    |
| Remove                        |             |                    |                    |
| 6) Change                     |             |                    | <u> </u>           |
| Add                           |             |                    |                    |
| Remove                        |             |                    |                    |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)  |
|--|
|  |
| N/A  |
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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)  |
| N/A  |
| TVA  |
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|  | N/A  |  |
|--|--|--|
| The date of each amendment(s) as   | loption:   | , if other than the                          |
| date this document was signed.   |  |  |
| N/A<br>Effective date <u>if applicable</u> :                             |  |  |
| <del>- • • • • • • • • • • • • • • • • • • •</del>                       | (no more than 90 days after amendment file   | date)  |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filing requir<br>partment of State's records.  | rements, this date will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |  |
| ■ The amendment(s) was/were ado action was not required.                 | pted by the incorporators, or board of directors without s   | hareholder action and shareholder            |
| ☐ The amendment(s) was/were ado<br>by the shareholders was/were su       | pted by the shareholders. The number of votes cast for the ficient for approval.   | he amendment(s)                              |
| ☐ The amendment(s) was/were app<br>must be separately provided for       | roved by the shareholders through voting groups. The for<br>each voting group entitled to vote separately on the amer                                  | llowing statement<br>adment(s);              |
| "The number of votes cast:   | for the amendment(s) was/were sufficient for approval  |  |
| by N/A   |  |  |
| -  | (voting group)   |  |
| Dated  | 9-14-21<br>aig brunzisi  |  |
| Signature &  | ing forungine  |  |
| (By a di<br>selected   | ector, president or other officer – if directors or officers, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary) |  |
| ı  | Craig Lorenzini  |  |
| -  | (Typed or printed name of person signing)  |  |
| •  | CFO  |  |
| -  | (Title of person signing)  |  |