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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORA	TION: P & R Renovation:	s and Pro Coatings, Inc.		
DOCUMENT NUMBE	P96000087196			
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
Re	obert A. Leslie II			
		Name of Contact Person	1	
Р	P & R Renovations and Pro Coatings, Inc.			
_	<u> </u>	Firm/ Company		
20	778 Weaver Park Drive			
_		Address		
C	earwater, FL 33765			
_		City/ State and Zip Cod	e	
askapro(@pandrpros.com			
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)	
	,	•		
For further information c	oncerning this matter, pleas	se call:		
Robert A. Leslie II		,727	734-0438	
Name of	Contact Person	at (at (734-0438 de & Daytime Telephone Number	
Enclosed is a check for the	ie following amount made	payable to the Florida Depa	irtment of State:	
S35 Filing Fee	S43.75 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)	
Amend Divisio P.O. Be	g Address ment Section n of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation

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(Name of Corporation	on as currently filed with the Flor	rida Dept. of State)	-	_
P96000087196				
(Docun	nent Number of Corporation (if kno	wn)		
Pursuant to the provisions of section 607,1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corpo	oration adopts the following	g amendr	nent(s) t
A. If amending name, enter the new name of the co	orporation:			
P & R Pro Coatings, Inc.		,	The ne	าเร
name must be distinguishable and contain the wor. "Corp.," "Inc" or Co.," or the designation "Corp. word "chartered," "professional association," or the	," "Inc," or "Co". A professiona	"incorporated" or the a	– bbreviatie	on
B. Enter new principal office address, if applicable	» <u>.</u>	7 6 0.5 2.00.5	š, o	
(Principal office address <u>MUST BE A STREET AD</u> E		ر حرا) A	
	<u> </u>	7 Table 1		
		Ú"	<u> </u>	1
C. Enter new mailing address, if applicable:		711 711	4 3	Ŏ.
(Mailing address MAY BE A POST OFFICE BO	<u></u>	<u></u>	· · ·	
		<u>~</u>	் ப	-
D. If amending the registered agent and/or register new registered agent and/or the new registered		r the name of the		
Name of New Registered Agent			-	
	(Florida street address)		-	
New Registered Office Address:		, Florida		
	(City)		Code)	•
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	i <mark>stered Agent:</mark> Lam familiar with and accent the o	hligations of the position		
as registered ugent.	- and gamental man and accept the o	ganous of the position.		

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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	icles, enter change(s) here: (Be specific)
 	
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<u>t an amendment provides for an exch</u>	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	
provisions for implementing the amer	

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 document's effective date on the Department of State's records.	not be listed as the
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 east for the amendment(s) was/were sufficient for approval	
by'''	
(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	
Signature (By a director, president or other officer – if directors or officers have not been	<u></u>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Robert A. Leslie II	
(Typed or printed name of person signing)	
President	
(Title of person signing)	