

P980000097654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

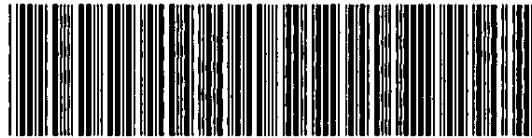
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10/05/09--01017--010 **43.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
09 OCT 19 PM 3:46

Amend/cc
@ 10/19/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Golden Brush, Inc.

DOCUMENT NUMBER: P98000097654

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

Please return all correspondence concerning this matter to the following:

Apraxia Kapaniris

Name of Contact Person

Golden Brush, Inc.

Firm/ Company

914 Peninsula Rd.

Address

Tarpon Springs, Florida 34689

City/ State and Zip Code

goldenbrushinc@verizon.net

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

For further information concerning this matter, please call:

Apraxia Kapaniris

Name of Contact Person

at (727)

937-5998

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 6, 2009

APREXIA KAPANIRIS
GOLDEN BRUSH, INC.
914 PENINSULA RD.
TARPON SPRINGS, FL 34689

SUBJECT: GOLDEN BRUSH, INC.
Ref. Number: P98000097654

We have received your document for GOLDEN BRUSH, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 609A00032328

RECEIVED
2009 OCT 19 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Golden Brush, Inc.

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

P98000097654

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
09 OCT 19 PM 3:46

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:

Drossos Kapaniris

New Registered Office Address:

914 Peninsula Rd.

(Florida street address)

Tarpon Springs

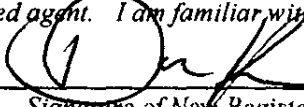
(City)

Florida 34689

(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Pres/S	Apraxia Kapaniris	914 Peninsula Rd. Tarpon Springs, Florida 34689	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
Pres	Drossos Kapaniris	503 Spring Lake Circle Tarpon Springs, Florida 34688	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

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

Amending stocks to read as follows

Apraxia Kapaniris for 0%

Drossos Kapaniris for 100%

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

The date of each amendment(s) adoption: August 6, 2009
Effective date if applicable: August 6, 2009 *(date of adoption is required)*
(no more than 90 days after amendment file date)

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 _____."
(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 August 6, 2009

Signature Apraxia Kapaniris
(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)

Apraxia Kapaniris
(Typed or printed name of person signing)

President/Sec
(Title of person signing)