P99000037048

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TALL AHASSEF, FI

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1/21/2022

COVER LETTER

TO: Amendment S Division of Co			
NAME OF CORP	ORATION: Southwest Florida	Scalcoating & Striping, Inc	
	P99000037048 MBER:		
	les of Amendment and fee are su		
Please return all co	rrespondence concerning this ma	tter to the following:	
	David Pruskauer		
		Name of Contact Persor	1
	SWFL Scalcoating & Striping	g. Inc	
		Firm/ Company	·····
	8101 Mainline Pkwy	. ,	
		Address	
	Fort Myers, Fl 33912		
		City/ State and Zip Code	e
	Brigitte.swflscalcoating@gm	ail.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, pleas	se call:	
Brigitte Brice		239	225-1479
Nan	ne of Contact Person	at (239) 225-1479 Area Code & Daytime Telephone Numb	
Enclosed is a check	, for the following amount made		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314		Amend	Address Iment Section on of Corporations

Articles of Amendment to Articles of Incorporation of

FILED

Southwest Florida Scalcoating & Striping, Inc	2022 AUG - AM -7:-4-7		
(Name of Corporation as current	uv theu with the ribrida Debt. Of State)		
249000037048	SECRETARY OF STATE TALLAHASSEE.FL		
(Document Number)	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this is Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s		
a. If amending name, enter the new name of the corporation:			
	The new		
name must be distinguishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
3. Enter new principal office address, if applicable:	8200 Penzanee Blvd		
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Fort Myers, Fl 33912		
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8200 Penzance Blvd		
"	Fort Myers, Fl 33912		
If amending the registered agent and/or registered office address new registered agent and/or the new registered office address News (No. 18) and the new registered office address			
Name of New Registered Agent			
(Florida st	treet address)		
N. B. Carlo LOW. Allanda	Phosi to		
New Registered Office Address:	(City) , Florida (Zıp Code)		
	ing, the		
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar			
Signature of New I	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 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 Doc, PT as a Change Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> .	John Doc	
\underline{X} Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	WP	Melea Pruskauer	8200 Penzance Blvd
X Add			Fort Myers, Ft 33912
<u>✓</u> Remove	_		
2) Change	<u> P</u>	David Pruskaner	8200 Penzance Stud
Add			It Myers, FL 3391)
Remove 3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additional she</i>	ets, if necessary). (E	Be specific)			
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			<u> </u>		
					
					
<u>fan amendment pr</u>	ovides for an exchangementing the amenda	ge, reclassification	<u>i, or cancellation (</u> and in the amonds	of issued shares,	
if not applicabl	e, indicate N/A)	nent ij not concan	ico in the amendi	nent usen.	
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	<u> </u>	<u>-</u>			
			_		

	07-27-2022	
The date of each amendment(s) a	doption:	, if other than th
date this document was signed.		
	01-2022	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	e will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder actio	on and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	()
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	nı
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
hv	••	
	(voting group)	
selecto	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that tiduciary) David Pruskauer (Typed or printed name of person signing)	
	President	
	(Title of person signing)	