

FD6000087261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

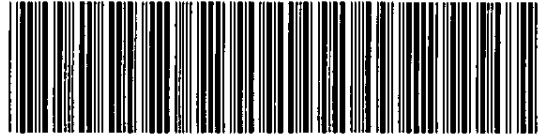
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900137126839

10/22/08--01007--012 **35.00

Amend

08 NOV 14 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

7. Roberts NOV 14 2008



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2008

SEBASTIAN LOPEZ
SEBASTIAN HOME SERVICES, INC.
18234 POPLAR RD
FORT MYERS, FL 33912

SUBJECT: SEBASTIAN HOME SERVICES, INC
Ref. Number: P06000087261

We have received your document for SEBASTIAN HOME SERVICES, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check only one statement under the adoption of amendment.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 408A00055123

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
NOV 14 AM 9:00
2008

. . .
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SEBASTIAN HOME SERVICES, INC. +

DOCUMENT NUMBER: P06000087261 +

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

Please return all correspondence concerning this matter to the following:

SEBASTIAN LOPEZ +
(Name of Contact Person)

SEBASTIAN HOME SERVICES, INC. +
(Firm/ Company)

18234 POPULAR RD. +
(Address)

FORT MYERS FL 33912 +
(City/ State and Zip Code)

For further information concerning this matter, please call:

SEBASTIAN LOPEZ + at (239) 289-0364
(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:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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
08 NOV 14 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEBASTIAN HOME SERVICES, INC. +
(Name of Corporation as currently filed with the Florida Dept. of State)

00600027161 +
(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: _____

New Registered Office Address: _____ (Florida street address)

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept and promise to act 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>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input 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)
PLEASE CHANGE PRESIDENT'S NAME FROM SEBASTIAN LOPEZ
TO JOSE LOPEZ

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)

The date of each amendment(s) adoption: 10/10/08

Effective date if applicable: 10/10/08
(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):*

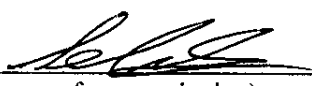
The number of votes cast for the amendment(s) was/were sufficient for approval
by _____
(voting group)


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.

Date: _____

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)

SEBASTIAN LOPEZ  +
(Typed or printed name of person signing)

PRESIDENT 
(Title of person signing)