P06000120158

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| PICK-UP | ☐ WAIT | MAIL |
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| (Bu | isiness Entity Name) | |
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| (Do | ocument Number) | |
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| Certified Copies | Certificates of | Status |
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| Consist Instructions to | Filing Officer | |
| 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 CORF | PORATION: | Men at Work Home Solu | utions Inc. |
|----------------------|--|---|--|
| DOCUMENT NU | MBER: | P060001201 | 58 |
| The enclosed Artic | les of Amendment and fe | ee are submitted for filing. | |
| Please return all co | rrespondence concerning | this matter to the following: | |
| | | Donald Schrepfer | |
| | | Name of Contact Person | . |
| | Men A | at Work Home Solutions Inc. | |
| ٠. | Firm/ Company | | |
| | | 2315 W Kirby Street Address | |
| | | Address | |
| • | - | Tampa, Florida 33604 | |
| | City/ State and Zip Code | | |
| | E-mail address: (to be | omesolutions@hotmail.com used for future annual report notification | on) |
| | ation concerning this matt | • | |
| Name | of Contact Person | at (<u>813</u>) Area Code & Daytim | e Telephone Number |
| Enclosed is a check | k for the following amour | nt made payable to the Florida D | epartment of State: |
| ☑ \$35 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclos | S52.50 Filing Fee Certificate of Status ed) Certified Copy (Additional Copy is enclosed) |
| • P.O. Box 6 | nt Section Corporations 327 | Street Address Amendment Section Division of Corporation Clifton Building | |
| Tallahassee | FL 32314 | 2661 Executive Center (| Circle |

Tallahassee, FL 32301

| Articles of Amendment | the state of the s |
|-----------------------------------|--|
| to | N. P. PARIS |
| Articles of Incorporation | 1:11 ~ |
| of | 09 DEC ED |
| k Home Solutions Inc , | ~C 3A |
| rently filed with the Florida Dep | L. of State STARY AM 9:53 |
| 6000120158 | TASSEE, FISTATE |
| | |

| wien at wo | rk nome Son | ulions inc ,_ | | AM o |
|--|----------------------|----------------------|-----------------------------|--------------------------------|
| (Name of Corporation as cu | rrently filed with | the Florida Dept. | of State 14 ARY OF | ⁴ / _{9:53} |
| (Name of Corporation as cu | 06000120158 | 3 | | STATE |
| (Document N | lumber of Corpora | ation (if known) | | CURIDA |
| Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation A. If amending name, enter the new name | 1: | | Profit Corporation ac | dopts the follow |
| A. If amending name, enter the new name | or the corporati | <u>vii.</u> | | |
| | | | | The new |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "p | the designation "G | Corp," "Inc," or "(| Co". A professiona | ited" or the l corporation |
| B. Enter new principal office address, if a | | 2315 W Kirby | Street | |
| (Principal office address MUST BE A STR | <u>EET ADDRESS</u>) | <u>Tampa</u> | | |
| | | Florida 3360 | 4 | |
| | | Tionaa oooo | ··· | _ |
| C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF) | | 2315 W Kirby | Street | . |
| | | <u>Tampa</u> | | |
| | | Florida 33604 | 4 | |
| D. If amending the registered agent and/o new registered agent and/or the new re | | | la, enter the name o | <u>f the</u> |
| Name of New Registered Agent: | Donald Sch | repfer | | |
| | 2315 W Kirk | ov Street | | |
| New Registered Office Address: | | rida street address) | <u></u> | |
| | Tampa | | , Florida <u>336</u> | 304 |
| | (City | <i>v)</i> | (Zip Code) | |
| New Registered Agent's Signature, if chan | aina Dogistanad | Agont | | |
| I hereby accept the appointment as registered | | | pt the obligations of | the position. |
| | ()(| 10 . L. | $\mathcal{O}_{\mathcal{O}}$ | |
| <u>. •</u> | Signature of No | w 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> | Address | Type of Action |
|--------------|---|--|---------------------|
| secreta | Dalia Schrepfer | 13001 Wickham Ridge Place Riverview Florida 33569 | _ □ Add □ Remove |
| treasur | Dalia Schrepfer | 13001 Wickham Ridge Place Riverview Florida 33569 | |
| secret | Joy Schrepfer | 2315 W Kirby Streer Tampa Florida 33604 | |
| | ling or adding additional Articl dditional sheets, if necessary). | | |
| | | | |
| | | | |
| | - | | |
| | | | |
| provisi | | ange, reclassification, or cancellation of is diment if not contained in the amendment | |
| N/A | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| The date of each amendment | t(s) adoption: <u>12</u> | 2-28-2009 |
|--|--------------------------|--|
| Effective date <u>if applicable</u> : | 12-28-2009 | (date of adoption is required) |
| | (no more than 9 | 00 days after amendment file date) |
| Adoption of Amendment(s) | (<u>CH</u> | IECK ONE) |
| The amendment(s) was/we by the sharéholders was/we | | shareholders. The number of votes cast for the amendment(s) approval. |
| | | ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s): |
| "The number of votes | cast for the amen | dment(s) was/were sufficient for approval |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/we action was not required. | re adopted by the | board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | re adopted by the | incorporators without shareholder action and shareholder |
| Dated_12-2 | 8-2009 | 00 0 0 |
| sele | | dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary) |
| | | Donald Schrepfer |
| | (Ту | ped or printed name of person signing) |
| | | President |
| | (Title o | f person signing) |