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R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: WINDSOR HANDYMAN INC DOCUMENT NUMBER: P10000037138 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MILAN IVANIC Name of Contact Person Firm/ Company 637 EAGLE POINTE SOUTH Address KISSIMMEE, FL 34746 City/ State and Zip Code MILANOFLORIDA73@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 3461202

Area Code & Daytime Telephone Number MILAN IVANIC Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	FILE		
15	APR 22	P#	3: 09

(Document Number of Corporation (if known) arsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment Articles of Incorporation: If amending name, enter the new name of the corporation: STATE PROPERTY MAINTENANCE INC The new 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 ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: (Mailing address MUST BE A STREET ADDRESS) Enter new mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)	WINDSOR HANDYMAN INC	SECOND REPORT	
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ew Registered Agent's Signature, if changing Registered Agent:			
	(City)	(Zip Code)	
	New Registered Agent's Signature, if changing Registered Agent:		
tereby accept the appointment as registered agent. I am jumitar with and accept the obligations of the position.	I hereby accept the appointment as registered agent. I am familiar with and accep	ot 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)

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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		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				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
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If an amendment provides for an exchi- provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

tate this document was signed.	loption:	, 11 oth
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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)	
	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_04/15/20	Mall	
selected	irector, 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 ed fiduciary by that fiduciary)	
	MILAN IVANIC	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	