H83439

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	Diversified Industrial Services, Inc.	
DOCUMENT NU	MBER:	H83639	
The enclosed Article	les of Amendment and fee a	re submitted for filing.	
Please return all con	rrespondence concerning thi	s matter to the following:	
_		Jeffrey T. Yonge	
_	N	ame of Contact Person	
	-		
	Diversi	fied Industrial Services, Inc.	
_		Firm/ Company	
<u>-</u>	13	724 Hope Sound Court	
		Address	
<u>.</u> -		acksonville, FL 32225	
		ity/ State and Zip Code	
	jty E-mail address: (to be use	8110@aol.com d for future annual report notification)	
For further informa	tion concerning this matter,	please call:	
	Jeff re y T. Yonge	at (904) 338-1643	
Name	of Contact Person	at (at (904) 338-1643 Area Code & Daytime Telephone Number	
Enclosed is a check	for the following amount m	ade payable to the Florida Department of State:	
	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)	osed)
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee.	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

es, Inc.	
the Florida Dept. of State)	
tion (if known)	
ites, this Florida Profit Corporation a	adopts the following
<u>DN:</u>	
nc.	The new
poration," "company," or "incorpor Corp," "Inc," or "Co". A professional iation," or the abbreviation "P.A."	rated" or the
13724 Hope Sound Court	
Jacksonville FI 32225	TAL PEC
Jackson vine, 1 L J2225	AH AH
	
13724 Hope Sound Court	ECRETARY OF LORIDA
Jacksonville, FL 32225	PH 1: 18
e address in Florida, enter the name of	of the
rida street address)	
. Florida	
(Zip Code)	
Agent: iliar with and accept the obligations of Registered Agent, if changing	^f the position.
	tion (if known) tes, this Florida Profit Corporation and tes, and the professional action, and the abbreviation and testing and t

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>	Name .	Address	Type of Action
VP, S	Jeffrey T. Yonge	13724 Hope Sound Court Jacksonville, FL 32225	
<u>VP</u>	Roy N. Alexander	6611 Bowie Road Jacksonville, FL 32219	
<u>s</u>	Jackson S. Yonge	12199 Silver Saddle Drive Jacksonville, FL 32258	
	ding or adding additional Artic dditional sheets, if necessary).		
provisi		ange, reclassification, or cancellation of dment if not contained in the amendmen	
		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	
			,
		•	

The date of each amendment	
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(sere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement of 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	,"
<u> </u>	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
sele	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Jeffrey T. Yonge
	(Typed or printed name of person signing)
	Sole Director and Shareholder
	(Title of person signing)