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SECRETARY OF STATE
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COVER LETTER

TO: Registration of Division of	on Section Corporations		· .	
SUBJECT: Instate Home Improvement Handy Man Service LLC				
Name of Limited Liability Company				
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
		Madiha Nashib Name of Person		
Name of Person				
InfotaxSquare.com Inc.				
Firm/Company				
109-13 Centerville Street, Suite 3R				
Address				
Ozone Park, NY 11417				
City/State and Zip Code				
barringtoncooke@yahoo.com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Madiha Nashib		at (516) 82	2-3100	
Name of Person		Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount:			
\$25.00 Filing Fe	ce \$\sum_\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Instate Home Improvement Handy Man Service LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 08/28/2009 The Articles of Organization for this Limited Liability Company were filed on _____ and assigned L09000083311 Florida document number ____ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Instate Home Improvement and Construction LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action Address Title Name RAYMOND MEKLE MGR ☐ Add Remove □ Add Remove ☐ Add ☐ Remove Mon [Remove □ Vqq Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) . 2009. Dated_ Signature of a member or authorized representative of a member Barrington Cooke-Manager
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00