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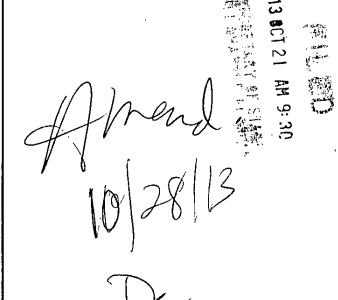
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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

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Division of Corporations					
NAME OF CORPORATION: DIVERSIFIED HOME SEZUICES & CONSTRUCTION, INC.					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
STEVEN L. CASH					
Name of Contact Person					
DIVERSIFIED HOME SERVICES + CONSTRUCTION, INC.					
9040 TRYFON BLVD. SUITE A-101 Address					
12inily 4L. 34635 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
STEVEN L. CASH at (727) 213-1705 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:					
\$35 Filing Fee Certificate of Status (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					

Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

Articles of Incorporation	.7 6
of 1	
DIVERSIFIED HOME SERVICES & CONSTRUCTION	え、上水の湯 男
(Name of Corporation as currently filed with the Florida Dept. of State)	
P00000051757	1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> its Articles of Incorporation:	adopts the following amendment
A. If amending name, enter the new name of the corporation:	4
N/A	The new
name must be distinguishable and contain the word "corporation," "company," or "incor" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corpoword "chartered," "professional association," or the abbreviation "P.A."	rporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) SUITE F	FON BLVD. 4-101
TRINITY,	Fi. 34655
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 9040 124	
SUITE ATTINITY, F	
D. If amending the registered agent and/or registered office address in Florida, enter the new registered agent and/or the new registered office address:	ame of the
Name of New Registered Agent N/A	
9040 TEYFON BLUD S (Florida street address)	VITE A-101
New Registered Office Address: (City) . Florid	da 34655 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligation of the control of the control 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		_ NA	
Add		,	- 1111
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding Attach additional sha	ng additional Articles, enter chets, if necessary). (Be specific	nange(s) here:	
Attacti aaannonai she	eis, ij necessary). (Be specijic	9	
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	hill drawn or a control to	***************************************	
f an amendment nro	ovides for an exchange, reclass	ification or cancellatio	n of issued chares
provisions for imple	menting the amendment if no	contained in the amen	dment itself:
(if not applicable	, indicate N/A)		
	<i></i>		***************************************
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The date of each amendment(s) adoption: _	09-24-2013	, if other than the
date this document was signed.		
Effective date if applicable:	10-01-2013	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) rapproval.	
	the shareholders through voting groups. The following statement ag group entitled to vote separately on the amendment(s):	
"The number of votes east for the am	endment(s) was/were sufficient for approval	
by	"	
(1	oting group)	
The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder	
Dated 09-24	-2013	
Signature	tun J. Cl	
(B) a director, pr	esident or other officer - if directors or officers have not been	
	corporator – if in the hands of a receiver, trustee, or other court	
appointed fiducia	ry by that fiduciary)	
	STEVEN L. CASH	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	