P0200050887

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Do	cument Number)	
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SECRETARY OF STATE TALL AHASSEE, FLORIDA

APPROVED AND FILED

C. LEWIS NOV 2.2 2013 EXAMINER

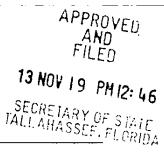
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Homewatc	h Services Etc.,	Inc.		
DOCUMENT NUMBER: P0200050887				
The enclosed Articles of Amendment and fee are su	ibmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
Carl A. Lorenzini				
***************************************	Name of Contact Person	1		
Homewatch Services Etc., Inc.				
	Firm/ Company			
26884 Piva Cour	26884 Piva Court			
	Address			
Bonita Springs, F	L 34135			
	City/ State and Zip Code	е		
info@HomewatchSe	rvicesEtc.com			
	sed for future annual report	notification)		
For further information concerning this matter, plea	se call:			
Carl A. Lorenzini	239	273-7059		
Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address	Street	Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**



Homewatch Services Etc., Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)	
P02000050887	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abl "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must co word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: 26884 Piva Court	
(Principal office address <u>MUST BE A STREET ADDRESS</u>) Bonita Springs, FL 34135	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:</u>	
Name of New Registered Agent N/A	
(Florida street address)	
New Registered Office Address:, Florida,	
(City) (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 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> Jol	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PST	Carl A. Lorenzini	26884 Piva Court
Add			Bonita Springs, FL 34135
Remove			
2) Change	D	Brittany L. Kepler	
Add			
√ Remove			
3) Change	D	Brittany L. Lorenzini	26884 Piva Court
Add			Bonita Springs, FL 34135
Remove			
4) Change	D	Karinna B. Lorenzini	28120 Dovewood Court
Add			Unit 208
Remove			Bonita Springs, FL 34135
5) Change			
Add			
Remove			
6) Change			
Add			
Pamaya			

E. <u>If amer</u> (Attach	nding or adding additional A additional sheets, if necessary,	rticles, enter change(s) here:	
N/A	auditional anodis, if necessary)	. (Be apooyie)		
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provis	mendment provides for an ex sions for implementing the an	nendment if not conta	on, or cancellation of i	ssued shares, it itself:
••	f not applicable, indicate N/A)			
N/A				
		· · ·	,,,	
				B* 1 11* 11*

APPROVED AND FILED

The date of each amendment(s)	adoption: November 15, 2013	13 NOV 19 Prof Sther than the
date this document was signed.		
Effective date if applicable:	ovember 15, 2013	SECRETARY OF STATE TALLAHASSEE FLORIDA
	(no more than 90 days after amendm	ent file date)
	(GUDGV OND)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cas sufficient for approval.	st for the amendment(s)
The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. or each voting group entitled to vote separately on the	The following statement se amendment(s):
"The number of votes can	st for the amendment(s) was/were sufficient for appro	oval
by		"
	(voting group)	
The amendment(s) was/were acaction was not required.	dopted by the board of directors without shareholder	action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action	on and shareholder
5 Novem	nber 15, 2013	
Signature		
	director, president or other-officer if directors or o	fficers have not been
	ted, by an incorporator – if in the hands of a receiver, inted fiduciary by that fiduciary)	, trustee, or other court
	Carl A. Lorenzini	
	(Typed or printed name of person	n signing)
	President/Secretary/Treasurer	
	(Title of person signing)	