P02000055967

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AT-HOME-S	SERVICE.COM, INC.	
DOCUMENT NUMBER: P02000055967		
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning thi	is matter to the following:	
Bernard Byrne		
(Name	of Contact Person)	
Central Florida Rentals & M	lanagement, Inc.	
(Fi	rm/ Company)	
203 Spanish Moss Road		
	(Address)	
Davenport, FL 33837-5515		
(City/S	tate and Zip Code)	•
For further information concerning this matter,	please call:	
Bernard Byrne	at (863)_424-02	
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:		
☐ \$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

Articles of Amendment to **Articles of Incorporation** of

AT-HOME	-SERVICE	.COM,	INC
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(Name of corporation as currently filed with the Florida Dept. of State)

P02000055967

(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

Must contain the word "corporation," "company," or "incorporated" or the abbreviation "C A professional corporation must contain the word "chartered", "professional association," or "incorporated" or the abbreviation "C	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicand/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	cate Article Number(s)
Article II - The principal place of business address: 203 Spanish Moss Road, Dave	enport, FL 33837-5515
The mailing address is: 8297 ChampionsGate Blvd., Unit 203, Champio	onsGate, FL 33896
Article V - The name and Florida street address of the registered	agent is:
Bernard Byrne, 203 Spanish Moss Road, Davenport, Ft. 33837-5515 - I certify that I am familiar with and accept the res	sponsibilities of registered agent.
Article VII - The officers and directors of the corporation are:	
Bernard Byrne - (President/Secretary), 8297 ChampionsGate Blvd., Unit 203, Cha	impionsGate, FL 33896
Remy Jeannin - (VicePresident) 8297 ChampionsGate Blvd., Unit 203, Cham	mpionsGate, FL 33896
I, Bernard Byrne, hereby certify that I am familiar with the requirements of Flori	da Statutes 607 and its
subsequent subsections as it relates to the duties and obligations of	f a registered agent.
(Attach additional pages if necessary)	Acanad Bree
If an amendment provides for exchange, reclassification, or cancellation of is for implementing the amendment if not contained in the amendment itself: (i	

(continued)

The date of each amendment(s) adoption: March 13th, 2006	
Effective date if applicable: March 13th, 2006	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	۲(
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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	7
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	on
The amendment(s) was/were adopted by the incorporators without shareholder action an shareholder action was not required.	ıd
Signature Acrual Apulle (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Bernard Byrne	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

FILING FEE: \$35