## P03 000146064

(Re	equestor's Name)	
(Ad	ldress)	-
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
· ·		,
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: A.C.R	.H. Service	es, Inc.
OCUMENT NUMB		70146064	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	nondence concerning this ma	tter to the following:	
	Laur	-a Taylor	
•	<del></del>	Name of Contact Persor	1
	A.C.R.H.	Name of Contact Person Services,	Inc.
•		Firm/ Company	
_	P.O.Box	1480	
	A	Address	
_	Apopka	Floric	1a 32704-1480
	' '	City/ State and Zip Code	e
	Lbras 1	City/State and Zip Code	6m
	É-mail address: (to be us	sed for future annual report	notification)
or further information	concerning this matter, pleas	se call;	
Laura	Taylor	at (407	383.8874
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
ロ \$35 Filing Fee	\$43.75 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)
	ing Address		Address ment Section

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 10

Articles of Incorporation

1 1 0 1	
A.C.K.H. S	Services, Inc.
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P0300014	16064
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Ca". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	174 Commerce Place
(Principal office address MUST BE A STREET ADDRESS)	11nit 107
	A 000 1/ 32707
	Apopka, FL 32703
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 1480
(malang address MAT DE A POST OFFICE BOA)	A
	Apopka, FC
	32704-1480
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre-	
Name of New Registered Agent Laura	L. Taylor
174 Comm	recePlace Unit 107
New Registered Office Address: Apo	pka Florida 32703
, ,	(Comp.)
New Registered Agent's Signature, if changing Registered Agen	
Thereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
$\mathcal{L}$	01 2
Mau	on Saylor
Signature of New	Registered Agent, if changing

Page 1 of 4

address of each Office (Attach additional shee Please note the officer! P = President; V= Vic Executive Officer; CFC held. President, Treasu Changes should be not	er and/or Direct ets, if necessary) director title by the President; T= O = Chief Finant arer, Director wo ed in the following leaves the corpor	or being added:  the first letter of the office title:  Treasurer; S= Secretary; D= Director; TR= 1  scial Officer. If an officer/director holds more  suld be PTD,  ng manner. Currently John Doe is listed as the  ration, Sally Smith is named the V and S. These	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office  PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change.
X Change	LT loh	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ce Jones	
_X Add	<u>SV</u> Sall	l <u>v Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
	V <u>STD</u>	Terry R. Penland	217 Altamonte Commerce Blud Suite 1230
Add		•	Altamonte Springs, FL 32714
2) Change Add	PD	Ronald B. Taylor	174 Semoran Commerce Place Apupka, FL
Remove 3) Change	<u>V</u>	Laura L. Taylor	32703 174 Semoran Commerce Place
Remove			Арорка, FL 32703
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

\_\_\_\_ Add

, ittaci paamona micela, y necesia	Articles, enter change(s) here: y). (Be specific)
NIA	
1.7 (1.7	
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<u>.                                    </u>	
· · · · · · · · · · · · · · · · · · ·	
***************************************	
lf an amendment provides for an e	exchange, reclassification, or cancellation of issued shares.
or implementing the a (if not applicable, indicate N/A)	amendment if not contained in the amendment itself:
<u> </u>	

The date date this d	f each amendment(s) adoption: 10 02 2019 , if other than to cument was signed.
	late if applicable: 10 02 2019  (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
	ne date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to effective date on the Department of State's records.
Adoption	of Amendment(s) (CHECK ONE)
	endment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) shareholders was/were sufficient for approval.
	endment(s) was/were approved by the shareholders through voting groups. The following statement is separately provided for each woting group entitled to vote separately on the amendment(s):
	he number of votes cast for the amendment(s) was/were sufficient for approval
t	(voting group)
	(voting group)
	endment(s) was/were adopted by the board of directors without shareholder action and shareholder as not required.
	endment(s) was/were adopted by the incorporators without shareholder action and shareholder as not required.
	Dated 10 0 2 2019
	Signature 200 2 = Continue
	(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)
	- 0
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Partita +
	Tresiden I