

From: Jessica Browning
3/21/2017

Fax: (813) 932-5244

To:

Fax: (850) 617-8380

Page: 1 of 5 03/22/2017 9:09 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000078503 3)))



H170000785033ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-8380

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : 120050000000

Phone : (813) 932-5244

Fax Number : (813) 932-3782

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: info@activatemylicense.com

RECEIVED

17 MAR 22 AM 9:14

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN
TOTAL HOME COMFORT INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAR 23 2017
C McNAIR

((H117000078503 3)))

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TOTAL HOME COMFORT INC.

DOCUMENT NUMBER: 03-0533804

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JESSICA BROWNING

Name of Contact Person

CONTRACTORS REPORTING SERVICE, INC

Firm/ Company

13795 N Nebraska Ave

Address

Tampa, FL 33613

City/ State and Zip Code

INFO@ACTIVATEMYLICENSE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JESSICA BROWNING

Name of Contact Person

at

(813) 932-5244

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$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)

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 Circle
Tallahassee, FL 32301

((H17000078503 3)))

FILED
SECRETARY OF CORPORATIONS
17 MAR 22 PM 4:30

((H17000078503 3)))

Articles of Amendment
to
Articles of Incorporation
of

TOTAL HOME COMFORT INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

03-0533804

PD3000156696

(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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. 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:

Name of New Registered Agent:

New Registered Office Address:

(Florida street 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

((H17000078503 3)))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 MAR 22 PM 4:30

((H17000078503 3)))

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
TREAS	MARIALBA BEAZ	131 N. Moon Avenue #2	<input type="checkbox"/> Add
		Brandon, FL 33511	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

((H17000078503 3)))

The date of each amendment(s) adoption: 03/21/2017

(date of adoption is required)

Effective date if applicable:

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ 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 _____."

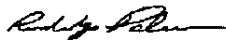
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 03/21/2017

Signature



(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)

Rudolfo Palermo

(Typed or printed name of person signing)

OFFICER

(Title of person signing)