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Amend Man. 31.14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DB Handy	Services, NC	•
DOCUMENT NUMI	D0400010001		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	David Baker		
	DB Handy Service		1
	392 Brookerdge	Firm/ Company ST NE	
	Palm Bay, FL 329	Address 907	
		City/ State and Zip Cod	e
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
David Baker		at (321	, 720-7396
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DB Handy Services, INC ·	3
(Name of Corporation as currently filed with the Fl	orida Dept. of State)
04000100213	
(Document Number of Corporation (if	known)
rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following ame
If amending name, enter the new name of the corporation:	
N/N	The
une must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cord "chartered," "professional association," or the abbreviation ".	Co". A professional corporation name must conta
Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	· / /.
	N/K
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address: 	
	•
Name of New Registered Agent	
<u>// A</u>	eet address)
(r toriaa stre	et adaress)
New Registered Office Address: (City)	, Florida
Cay	(Zip Coac)
ew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
	- Indiana
Signature of New Registered A	1gent, 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	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Dennis Randolph Wickens	162 Sunset Drive
Add			West Melbourne,FL 32904
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
_ Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			_125.007
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	cicles, enter change(s) here: (Be specific)
-	
****	· · · · · · · · · · · · · · · · · · ·
	h
an amendment provides for an exchange the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Address in the contained in the amendment riser.
,,	
,,	

date this document was signed.	_, if other than the
Index 40, 004.4	
Effective date if applicable: July 10, 2014 (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 7-10-14 Signature 2 222 3000	
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)	_
David Baker	_
(Typed or printed name of person signing)	
President	_
(Title of person signing)	