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OIVISION OF CORPORATION

V HERRING APR - 3 2017

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DB Handy Service	s, Inc.			
DOCUMENT NUMB	ER:		· .		
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	David Baker				
		Name of Contact Persor	1		
	DB Handy Service				
		Firm/ Company			
	392 Brookedge ST, NE	t inin Company			
,					
		Address			
	Palm Bay Fl 32907				
		City/ State and Zip Code	e		
	U mail addrage (to be u	sed for future annual report	notification)		
	15-man address, (to be d.	sed for factive annual report			
For further information	n concerning this matter, pleas	se call:			
David Baker		at ( 321	720-7396		
Name o	David Baker at (321 720-7396  Name of Contact Person Area Code & Daytime Telephone N		de & Daytime Telephone Number		
Enclosed is a check fo	r 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)		
Mai	ling Address	<u>Street</u>	Address		
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations Clifton Building			
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILLED SECRETARY OF STAIL DIVISION OF CORPORATION:

2017 MAR 30 PM 1: 54

DB Handy Services,Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P040000100213	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>E</i> its Articles of Incorporation:	Ilorida 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 "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "I	'o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
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:  new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	. Florida
	Cityi (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	

## 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: CEO = 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 Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	D	Dennis R Wickens	162 Sunset Drive	
Add X Remove			West Melbourne Fl. 32904	
2) Change				
Add Remove				
3) Change				
Add				
4) Change				
Add Remove				
5) Change				
Add Remove				
6) Change				
Add				
Remove				

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	
	· · · · · · · · · · · · · · · · · · ·	
		<u> </u>
00000		
		<del></del>
	<u> </u>	
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/4)	ange, reclassification, or cancellation of issued shandment if not contained in the amendment itself:	res,
(у пи арупкион, такин, т.т.)		
		<u>.</u>

	03/27/2017	
The date of each amendment(s) ac	loption:	if other than the
date this document was signed.		
	7/207	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date w partment of State's records	fill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
☐ The amendment(s) was/were app must he separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
03/27/2017 Dated	,	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	