## P05000099121

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | idress)            |             |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | WAIT               | MAIL        |
| (Bu                     | isiness Entity Nan | ne)         |
| (Do                     | ocument Number)    |             |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: CHARLE DOCUMENT NUMBER: P05000099   | S E. NICOLA SR.<br>1121   | HANDYMAN, INC.  |  |  |  |
|--|---|---|--|--|--|
| The enclosed Articles of Amendment and fee a   |   |   |  |  |  |
| Please return all correspondence concerning this   | s matter to the following:  |   |  |  |  |
| Charles E. Nic   | ola, Sr   |   |  |  |  |
| <del>-</del>   | Name of Contact Perso   | on  |  |  |  |
| CHARLES E. I   | VICOLA SR. HAN  | DÝMAN, INC.   |  |  |  |
| -  | Firm/ Company   |   |  |  |  |
| 1218 ORCHID  | CT  |   |  |  |  |
| Naples, FL 34  | Address   |   |  |  |  |
| <u>Napies, 1 L 34</u>  | City/ State and Zip Coo   |   |  |  |  |
|  | •   | ic  |  |  |  |
| jcnicola10@aol.co  |   |   |  |  |  |
| E-mail address: (to t  | be used for future annual repor   | inotification)  |  |  |  |
| For further information concerning this matter, p  | please call:  |   |  |  |  |
| Charles E. Nicola, Sr  | at (239   | 784-8360  |  |  |  |
| Name of Contact Person   |   | ode & Daytime Telephone Number  |  |  |  |
| Enclosed is a check for the following amount m   | 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 State                                     | & □\$43.75 Filing Fee &   | □\$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 | Amen<br>Divisi<br>Cliftor<br>2661 I   | Address dment Section on of Corporations n Building Executive Center Circle assee, FL 32301 |  |  |  |

## Articles of Amendment to Articles of Incorporation of

## CHARLES E. NICOLA SR. HANDYMAN, INC.

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

P05000099121 (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 be distinguishable and contain t   | he word "corporation," "comp                              | any," or "incorpor   | The<br>ated" or the abbre |
|---|---|----------------------|---------------------------|
| p.," "Inc.," or Co.," or the designation<br>"chartered," "professional association,"  |   | rojessionai corporai | ion name musi coni        |
| nter new principal office address, if app<br>cipal office address <u>MUST BE A STREE</u>  |   |                      |                           |
|   |   |                      |                           |
| nter new mailing address, if applicable   | <del></del>   |                      | <del></del>               |
|   |   |                      |                           |
| lailing address <u>MAY BE A POST OFFI</u>   |   |                      |                           |
| Aailing address <u>MAY BE A POST OFFI</u>   |   |                      |                           |
| Aailing address <u>MAY BE A POST OFF</u> I  |   |                      |                           |
| amending the registered agent and/or  | registered office address in Flo                          | rida, enter the nam  | e of the                  |
| amending the registered agent and/or<br>w registered agent and/or the new reg   | registered office address in Flo                          | rida, enter the nam  | e of the                  |
| amending the registered agent and/or  | registered office address in Flo                          | rida, enter the nam  | e of the                  |
| amending the registered agent and/or<br>w registered agent and/or the new reg   | registered office address in Flo                          |                      | e of the                  |
| Mailing address MAY BE A POST OFFI  amending the registered agent and/or ew registered ag ent and/or the new registered Agent  Name of New Registered Agent  New Registered Office Address: | registered office address in Floristered of fice address: |                      | e of the                  |

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                   | <u>v</u>     | Mike Jones                            |               |                  |
| X Add                      | <u>sv</u>    | Sally Smith                           |               |                  |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u>                           |               | <u>Addres</u> s  |
| () Change                  | D            | William Den                           | nis Winans II | 1218 ORCHID CT.  |
| X Add                      |              |                                       |               | Naples, FL 34110 |
| Remove                     |              |                                       |               |                  |
| 2) Change                  |              |                                       |               |                  |
| Add                        |              |                                       |               |                  |
| Remove                     |              |                                       |               |                  |
| 3) Change                  |              |                                       |               |                  |
| Add                        |              |                                       |               |                  |
| Remove                     |              |                                       |               |                  |
| 4) Change                  |              |                                       |               |                  |
| Add                        |              |                                       |               |                  |
| Remove                     |              |                                       |               |                  |
| 5) Change                  |              | _                                     |               |                  |
| Add                        |              |                                       |               |                  |
| Remove                     |              |                                       |               |                  |
| 6) Change                  |              |                                       |               |                  |
| Add                        |              | · · · · · · · · · · · · · · · · · · · |               |                  |
| Remove                     |              |                                       |               |                  |
|                            |              |                                       |               |                  |

| E. If amending or adding additional Arti (Attach additional sheets, if necessary). |   |
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| F. <u>If an amendment provides for an exch</u>                                     | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer<br>(if not applicable, indicate N/A)          | ndment if not contained in the amendment itself:          |
| Reclassification of 10 shares fro  | om Charles E. Nicola, Sr to William Dennis Winans II      |
|  |   |
|  |   |
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|  |   |
|  |   |
| ,  |   |

| The date of each amendment(s) adoption:  | , if other than the |
|--|---------------------|
| date this document was signed.   |                     |
| Effective date if applicable: (no more than 90 days after amendment file date)   | _                   |
| (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)  |                     |
| (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 7-20-13  |                     |
| Dated 7-20-13 Signature Charles E. Nicola Ar.  |                     |
| (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) |                     |
| Charles E Nicola, Sr   |                     |
| (Typed or printed name of person signing)  |                     |
| President  |                     |
| (Title of person signing)  |                     |