## P07000108233

(Requ	uestor's Name)	
(Addr	ess)	
(Addı	ess)	
(City/	State/Zip/Phone	<del>;</del> #)
PICK-UP	<b></b> WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doce	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

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ZOIG JUL II PM I: 48
SECRETARY OF PINIE.

Amend

JUL 11 2016 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	TION:RJ1	HOME SOLUTIO	ONS, INC.			
DOCUMENT NUMBER	<b>k:</b>	P0700010823	3			
The enclosed Articles of	Imendment and fee are su	ibmitted for filing	i <b>.</b>			
Please return all correspon	idence concerning this ma	tter to the followi	ng:			
		FRITZ J. ROE	ECKER			
<del></del>		Name of Cont	act Person			
	R	U HOME SOLUT	TIONS, IN	c.		
		Firm/ Cor	mpany			
247 SW 8TH STREET #192						
	Address					
		MIAMI, FL	33130			
		City/ State and	d Zip Code			
		fritzjoerg@att	.net			
	E-mail address: (to be us	sed for future ann	ual report	notification)		
Fig. 6 adv. 2.6.						
For further information co	ncerning this matter, pleas	se call:				
FRITZ J. ROECKER		at (	305	282-5867		
Name of C			le & Daytime Telephone Number			
Enclosed is a check for the	e following amount made	payable to the Flo	orida Depar	rtment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional copenclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Amendr Division P.O. Bo Tallahas		Amendo Division Clifton 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301			



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 9, 2016

FRITZ J. ROECKER RJ HOME SOLUTIONS, INC 247 SW 8TH STREET #192 MIAMI, FL 33130

SUBJECT: RJ HOME SOLUTIONS, INC. Ref. Number: P07000108233

We have received your document for RJ HOME SOLUTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The corporation name is required on the 1st page of the amendment and please check only 1(one) box regarding the adoption of the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

RECEIVED

6 JULIT PMP: 56

9EPARTIENT OF STATE
VISION OF CORPORATION

ALL AHASSFE, FLORIDA

Letter Number: 416A00012197

## Articles of Amendment to Articles of Incorporation of

RJ HOME SOU	LUMONS IN	ic,	
(Name of Corporation as curren		a Dept. of State)	
P0700	00108233		
(Document Number	of Corporation (if known	)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s <i>Florida Profit Corpora</i>	tion adopts the following	amendment(s) t
A. If amending name, enter the new name of the corporation:			
N/A			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	"Co". A professional c	ncorporated" or the ab	breviation
B. Enter new principal office address, if applicable:	N/A		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	***		
		7 S	7016
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
		me To	3 ED
D. If amending the registered agent and/or registered office add	duose in Florido, ontor t	A name of the	<u> </u>
new registered agent and/or the new registered office address		ie name of the	
Name of New Registered Agent	N/A		
(Florida s	treet address)	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	N/A	, Florida	
New Registered Office Address.	(City)	Zip Co	ode)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	it: with and accept the obli	gations of the position,	
Signature of New	Registered Agent, if char	nging	

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 <math>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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	N/A	_	N/A	N/A
Add				
Remove				
2) Change	<u> </u>			<del></del>
Add				
Remove				
3) Change	<del></del>	_		
Add		`		****
Remove				
4) Change	<del>.</del>			
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
ARTICI	LE III: PURPOSE			
Previous	s: The purpose for which the corporation is organized is: REAL ESTATE			
New:	The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS			
F. <u>lfan</u> prov	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:			
 N/A	(if not applicable, indicate N/A)			
<del></del>				
<del></del>				

	IBD	
The date of each amendment(s) adopt	tion:	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :	AS PER FILING	
Ellective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this datement of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	d by the shareholders. The number of votes cast for the amendment(ient for approval.	s)
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for t	the amendment(s) was/were sufficient for approval	
by	N/A	
	(voting group)	
action was not required.	d by the board of directors without shareholder action and shareholder d by the incorporators without shareholder action and shareholder	er
JUN Dated	E 2, 2016	
Signature	+GB XI Dectas	n to the sequence
	tor, president or other officer – if directors or officers have not been	_
	y an incorporator – if in the hands of a receiver, trustee, or other countifiduciary)	π
	FRITZ J. ROECKER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	