|                      | (Requestor's Name)       |
|----------------------|--------------------------|
|                      | (Address)                |
|                      | ` ;                      |
| 1 12 2               | (Address)                |
|                      | (City/State/Zip/Phone #) |
| PICK-UF              | P                        |
|                      | (Business Entity Name)   |
|                      | (Document Number)        |
| Certified Copies     | Certificates of Status   |
| Special Instructions | to Filing Officer:       |
|                      |                          |
|                      |                          |
|                      |                          |
| ·                    |                          |
|                      | Office Use Only          |

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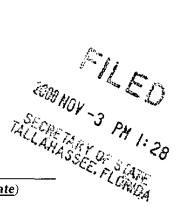


## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION:   | COLEGA'S HOME SERVICES AND REPAIRS, INC.  |
|--|---|
| DOCUMENT NUMBER:   | P08000053761  |
| The enclosed Articles of Amendmen  | nt and fee are submitted for filing.  |
| Please return all correspondence cor   | ncerning this matter to the following:  |
|  | LAZARO J. SANCHEZ   |
|  | (Name of Contact Person)  |
|  | (Firm/ Company)   |
| <del> </del>   | 10207 SW 2 ST   |
|  | (Address)   |
|  | MIAMI, FL 33174<br>(City/ State and Zip Code)   |
| For further information concerning t   | this matter, please call:   |
| LAZARO J. SANCHEZ  | at ( <u>305</u> ) <u>984-0972</u>   |
| (Name of Contact Person)   | (Area Code & Daytime Telephone Number)  |
| _  | g amount made payable to the Florida Department of State:   |
| \$35 Filing Fee \$43.75 Filing Certificate of  |   |
| 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 |

## **Articles of Amendment Articles of Incorporation** of



## COLEGA'S HOME SERVICES AND REPAIRS, INC.

| (Name of Corporation as currently filed with the Florida Dept. of State) |   |    |  |  |  |
|--|---|----|--|--|--|
|  | P08000053761  |    |  |  |  |
|  | (Document Number of Corporation (if known)  |    |  |  |  |
| ant to   | the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> as | ıd |  |  |  |

| It amanding name antoutha new raw  | 0.13                           |  |                         |
|--|--------------------------------|--|-------------------------|
| A. If amending name, enter the new nam   |                                |  |                         |
|  |                                | ENANCE, INC.   | . <del></del>           |
| The new name must be distinguishable incorporated" or the abbreviation "Corp Co". A professional corporation is ssociation," or the abbreviation "P.A."  | o.," "Inc.," c                 | or Co.," or the designation  | "Corp," "Inc," or       |
| Enter new principal office address, if   | applicable:                    | N/A  |                         |
| Principal office address <u>MUST BE A STR</u>  |                                | ESS)   |                         |
|  |                                | <u> </u>   |                         |
|  |                                |  |                         |
|  |                                |  |                         |
| Enter new mailing address, if applica  |                                | A ( / A  |                         |
| (Mailing address <u>MAY BE A POST OF</u>   | FFICE BOX)                     | <u>N/A</u>   |                         |
|  |                                |  |                         |
|  |                                |  |                         |
|  |                                |  |                         |
|  |                                |  |                         |
| . If amending the registered agent and/  | or registered                  | office address in Florida  | enter the name of the   |
| . If amending the registered agent and/onew registered agent and/or the new r  | or registered<br>egistered off | office address in Florida, e   | enter the name of the   |
| new registered agent and/or the new r  | egistered off                  | office address in Florida, e<br>ice address:                         | enter the name of the   |
| If amending the registered agent and/onew registered agent and/or the new remains of New Registered Agent:   | or registered<br>egistered off | office address in Florida, office address:                           | enter the name of the   |
| new registered agent and/or the new r  | egistered off                  | office address in Florida, e<br>ice address:                         | enter the name of the   |
| new registered agent and/or the new r  | egistered off<br>N/A           | office address in Florida, office address:  (Florida street address) | enter the name of the   |
| new registered agent and/or the new r  | egistered off<br>N/A           | ice address:   |                         |
| new registered agent and/or the new r  | egistered off<br>N/A           | ice address:  (Florida street address)                               | , Florida               |
| new registered agent and/or the new r  | egistered off<br>N/A           | ice address:   |                         |
| new registered agent and/or the new r  Name of New Registered Agent:  New Registered Office Address:   | N/A N/A                        | ice address:  (Florida street address)  (City)                       | , Florida               |
| Name of New Registered Agent:  | N/A  N/A  N/A                  | ice address:  (Florida street address)  (City)  ered Agent:          | , Florida<br>(Zip Code) |
| new registered agent and/or the new registered agent:  Name of New Registered Agent:  New Registered Office Address:  ew Registered Agent's Signature, if characteristics appointment as registered. | N/A  N/A  N/A                  | ice address:  (Florida street address)  (City)  ered Agent:          | , Florida<br>(Zip Code) |

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>  | Address  | Type of Action                          |
|---------------|--|--|---|
| N/A           |  | <del></del>  | Add Remove                              |
|               |  |  |   |
|               |  |  | Add Remove                              |
|               | nding or adding additional Articles, ent<br>additional sheets. if necessary). (Be spe                    |  |   |
|               |  |  |   |
|               |  |  |   |
| <u>provis</u> | nmendment provides for an exchange, resions for implementing the amendment not applicable, indicate N/A) | eclassification, or cancella<br>if not contained in the am | ition of issued shares, endment itself: |
| N/A           |  |  |   |
|               |  |  |   |
|               |  |  |   |
|               |  |  |   |

| The date of each a             | mendment(s) a         | doption:10/30/2008  |
|--------------------------------|-----------------------|---|
| Effective date if ar           | pplicable:            | 10/30/2008  |
|                                |                       | more than 90 days after amendment file date)  |
| Adoption of Amen               | dment(s)              | ( <u>CHECK ONE</u> )  |
|                                |                       | opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.  |
|                                |                       | proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):  |
| "The numb                      | er of votes cast      | or the amendment(s) was/were sufficient for approval  |
| by                             |                       | •   |
|                                | (vol                  | ing group)  |
| The amendment action was not r |                       | opted by the board of directors without shareholder action and shareholder  |
| The amendment action was not r | •                     | opted by the incorporators without shareholder action and shareholder   |
| r                              | oatedOC               | TOBER 30, 2008  |
| S                              | ignature              |   |
|                                | (By a di-<br>selected | ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary) |
|                                |                       | LAZARO J. SANCHEZ   |
|                                |                       | (Typed or printed name of person signing)   |
|                                |                       | PRESIDENT   |
|                                |                       | (Title of person signing)   |