## P0900055773

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## **COVER LETTER**

TO: Amendment Section

· Division of Corporations	• •
NAME OF CORPORATION: JS H	andyman Services, Inc.
DOCUMENT NUMBER: P0900	0055773
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
	K. Latiff.
Name	e of Contact Person
Js Hand	lyman Services, Inc
F	Firm/ Company
12235 SW	1920 TERRACE
	Address
miami FL	33177
City/	State and Zip Code
Kazfaz @ c	r future annual report notification)
L-mail address. (to be used to	rature annual report nonneation,
For further information concerning this matter, ple	ase call:
	_at (305 ) 219 - 4108
Name of Contact Person	at ( OOS ) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	
□ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
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Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

JS Han		rvices, Inc	<u>.</u>
(Name of Corporation as curre	ently filed with the Florids	Dept. of State	
<u> </u>	055773		
(Document Nun	ther of Corporation (if know	wn)	
rsuant to the provisions of section 607.100 nendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Fl	orida Profit Corporatio	n adopts the following
If amending name, enter the new name of	f the corporation:		
JS Carpentr	v. Inc.	. !	The new
me must be distinguishable and contain breviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "pro	designation "Corp," "Inc,	," or "Co". A professi	porated" or the onal corporation
Enter new principal office address, if app rincipal office address MUST BE A STREE		· · · ' }	
rincipal office address <u>MOST BE A STREE</u>	<u>1 AUUKESS</u> )		<b>=</b>
Enter new mailing address, if applicable			
(muning nunress MAT BE A POST OFFIC	CE BUX		
			- <del>20</del>
If amending the registered agent and/or r		Florida, enter the nan	ie of the
new registered agent and/or the new regis	stered office address:	•	
Name of New Registered Agent:		<del></del>	
			•
New Registered Office Address:	(Florida street ac	ddress)	
·	·	, Florida	•
	(City)	(Zip Code)	
w Registered Agent's Signature, if changing	ng Registered Agent:	ı	
ereby accept the appointment as registered a		nd accept the obligations	of the position.
		·	
	ignature of New Registered	Agent 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)

<u>Title</u>	Name	Address	Type of Action
			☐ Add ☐ Remove
			<u></u>
			Remove
E. <u>If amer</u> (attach	nding or adding additional Ar additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
			<del> </del>
			:
provis	ions for implementing the am	change, reclassification, or cancellatendment if not contained in the ame	tion of issued shares, ndment itself;
(if	not applicable, indicate N/A)		1
-			
			,

The date of each amendment(s)	adoption: <u>6-28-10</u>	
Effective date <u>if applicable</u> :	(date of adoption is required	·
(n	o more than 90 days after amendment file da	te)
Adoption of Amendment(s)	(CHECK ONE)	;
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of vsufficient for approval.	votes cast for the amendment(s)
	approved by the shareholders through voting government or each voting group entitled to vote separate.	
"The number of votes cast	t for the amendment(s) was/were sufficient fo	or approval'
by(vo	oting group) ."	
action was not required.	dopted by the board of directors without shar	
Dated 6	28-10	•
Signature <u>M</u>	shamed . K. hatell	• :
selected	irector, president or other officer if director d, by an incorporator – if in the hands of a rected fiduciary by that fiduciary)	
_	Mohamed K. La (Typed or printed name of person s	rtiff
	(Typed or printed name of person s	igning)
· 	President	
•	(Title of person signing)	