D09000065100)

(Re	questor's Name)	
· (Ad	dress)	
, (Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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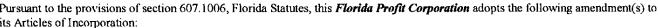
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: RODRIGUE	EZ HANDYMAN	SERVICES, INC			
DOCUMENT NUMB	BER: P0900006510	0				
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.				
Please return all corres	spondence concerning this mat	tter to the following:				
	TERESO RODRI	GUEZ				
		Name of Contact Person	1			
			·			
	2424 MANNEL EED A	Firm/ Company				
	3421 WINKLER	. 				
	FORT MYERS, FLORIDA 33916					
	TORT WILLIO, I	City/ State and Zip Code	2			
	مامم کرد می داداداد	•	-			
sar	nddollarser@aol.c	om sed for future annual report	notification)			
	12-man address. (to be de	ica for fatare annual report	notineation)			
For further information	n concerning this matter, pleas	se call:				
Tereso Rodri	guez	at (239	245-3171			
Name (of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	ertment 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)			
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Eassee, FL 32301			

Articles of Amendment · Articles of Incorporation

RODRIGUEZ HANDYMAN SERVICES, INC



	<u>. </u>
Articles of Ai	mendment orporation INC lorida Dept. of State)
to · Articles of Inc	orporation (1255)
of	NO ATOM 6 2
RODRIGUEZ HANDYMAN SERVICES, I	lorida Dant of Stata
P0900065100	Mila Dept. St State
(Document Number of Corporation (il	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendm
A. If amending name, enter the new name of the corporation: SANDDOLLAR SERVICES, CORP	The ne
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation." (Co". A professional corporation name must contain to
B. Enter new principal office address, if applicable:	3421 WINKLER AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	APT# 404
	FORT MYERS, FL 33916
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3421 WINKLER AVE
	APT# 404
	FORT MYERS, FL 33916
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address: (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent. I am familiar v	
Signature of New Registered A	Agent, if changing

address of each Officer (Attach additional sheets Please note the officer/dip = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones lead Mike Jones, V as Remove	and/or D , if neces. rector tit. Presiden = Chief i er, Direct I in the fo wes the c	Director be sary) le by the fi t; T= Trea Financial for would b or would b lowing m orporation	eing added: rst letter of the office title asurer; S= Secretary; D= Officer. If an officer/dir ae PTD. anner. Currently John D a Sally Smith is named th	: = Director; TR= Tr ector holds more th Doe is listed as the P	lirector being removed and title, name, and ustee; $C = Chairman \ or \ Clerk; \ CEO = Chief han one title, list the first letter of each office and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,$
Example: X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jos	<u>nes</u>		
X Add	<u>sv</u>	Sally Sm	nith		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			

____ Add

____ Remove

ttach <i>additioi</i>	al sheets, if necessar	v). (Be specifi	(c)		
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an amendm	ent provides for an e r implementing the a	xchange, reclas	ssification, or c	ancellation of issu	ed shares,
if not ap	r implementing the s plicable, indicate N/A	<u>menoment it n</u>	ot contamea m	the amendment i	iseii.
.,	•	•			
		- -			

The date of each amendment(s) ad	loption:
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were sufficiently.	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	proved by the shareholders through voting groups. The following statement 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	,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	-5-12
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – in the hands of a receiver, trustee, or other court
appoint	ted fiduciary by that fiduciary)
	Tereso Rodriguez
	(Typed or printed name of person signing)
	President
	(Title of person signing)