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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF COR	RPORATION:	R.E.O. Service Masters	
DOCUMENT N	UMBER:	P0900090714	
The enclosed Art	icles of Amendment and fe	e are submitted for filing.	
Please return all	correspondence concerning	this matter to the following:	
	The second secon	Michelle Hage Name of Contact Person	
	F	R.E.O Service Masters	
		Firm/ Company	
	2	2855 Hawthorne Street Address	•
		Orlando, Fl 32806 City/ State and Zip Code	
_	Non E-mail address: (to be	nagator@cfl.rr.com used for future annual report notification)	
Nan			
\$35 Filing Fee ∴	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of St Certified Copy (Additional Copy (Additional Copy	
Division P.O. Box	ent Section of Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	· *. ຸ •

Articles of Amendment. Articles of Incorporation of

R.E.O. Service Masters, Inc.

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

P09000090714

(Document Number of Corporation (if known)

A. If amending name, enter the new name of th	e corporation:		
			new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the de name must contain the word "chartered," "profes	signation "Corp," "I	nc," or "Co". A professional corpor	r the ation-
B. Enter new principal office address, if application	able:		
Principal office address <u>MUST BE A STREET</u> A			
· ·	· .		
1			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> BOX</u>)	·	
	·		
•			
D. If amending the registered agent and/or reg	ristered office address	in Florida, enter the name of the	
new registered agent and/or the new registe			
Name of New Projections of Asserts			•
Name of New Registered Agent:			
			٠
New Registered Office Address:	(Florida stree	t address)	_++ *·····
The state of the s		, Florida	_
	(City)	(Zip Code)	_
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		h and accept the obligations of the pos.	ition.
· · · · · · · · · · · · · · · · · · ·	3		

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) **Type of Action** Title Name Address Pres. Michelle Hage ☑ Add 2855 Hawthorne Street ☐ Remove Orlando, Florida 32806 ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of eac	h amendment(s) adoption:
Effective date if	(date of adoption is required)
Effective date 1	(no more than 90 days after amendment file date)
Adoption of An	nendment(s) (CHECK ONE)
	nent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(sholders was/were sufficient for approval.
	nent(s) was/were approved by the shareholders through voting groups. The following statemed arately provided for each voting group entitled to vote separately on the amendment(s):
: "The nu	mber of votes cast for the amendment(s) was/were sufficient for approval
by -	(voting group)
The amendm	nent(s) was/were adopted by the board of directors without shareholder action and shareholder
The amendm	nent(s) was/were adopted by the incorporators without shareholder action and shareholder not required.
•	Dated_July 26,2010
	Signature MA
	(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)
٠.	Michelle HAGE
	(Typed or printed name of person signing)
-	The Rais of the State of the St
	(Title of person signing)