# P100000 22337

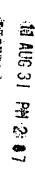
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#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION:	Magdiel Handyman Servic	es Inc			
DOCUMENT NU	P10000022337					
The enclosed Artic	les of Amendment and fee a	are submitted for filing.				
Please return all co	rrespondence concerning th	is matter to the following:				
-		Magdiel Santos	•			
	Γ	Name of Contact Person				
Magdiel Handyman Services Inc Firm/ Company						
					_	4363 Evelyn Pl
		Address				
_	Lake	Worth, Florida 33463				
	C	City/ State and Zip Code				
<del></del>	santosma E-mail address: (to be use	gdiel23@yahoo.com ed for future annual report notification)	··			
For further informa	tion concerning this matter,	please call:				
	lagdiel Santos		24-1804			
Name	of Contact Person	Area Code & Daytime Tel	ephone Number			
Enclosed is a check	for the following amount n	nade payable to the Florida Depar	tment of State:			
	☐ \$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)			
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 Circl Tallahassee, FL 32301	e			

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

## Magdiel Handyman Services Inc (Name of Corporation as currently filed with the Florida Dept. of State)

#### P10000022337

	f the corporatio	·	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Ĉ	orp," "Inc," or "Co". A profession	
B. Enter new principal office address, if applicable:		4363 Evelyn Place	
(Principal office address <u>MUST BE A STREE</u>	<u>T ADDRESS</u> )	Lake Worth, Fl 33463	
C. Enter new mailing address, if applicables (Mailing address MAY BE A POST OFFICE)		4363 Evelyn Place	
		Lake Worth, Florida 33463	
D. If amending the registered agent and/or r new registered agent and/or the new regis			of the
			e of the
new registered agent and/or the new regis	stered office add		of the
new registered agent and/or the new regis	stered office add	ida street address) , Florida	of the

## 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
<u>VP</u>	Misael Dias	1006 13th Ave North Lake Worth Florida 33460	☑ Add ☐ Remove
<del></del>			
<del></del>	<del></del>		
	ling or adding additional Artic Iditional sheets, if necessary).		
provisio	nendment provides for an exchons for implementing the amenot applicable, indicate N/A)	ange, reclassification, or cancellation dment if not contained in the amendm	of issued shares, ent itself:

The date of each amendmen	t(s) adoption: $08$	3/29/2011
Effective date <u>if applicable</u> :	08/29/2011	(date of adoption is required)
	(no more than 9	90 days after amendment file date)
Adoption of Amendment(s)	(CH	HECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
		ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	dment(s) was/were sufficient for approval
<sub>bv</sub> shareholders		,32
	(voting group)	
action was not required.		board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder
Dated_08/2	9/2011	· · · · · · · · · · · · · · · · · · ·
sele		dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Magdiel Santos
	(Ту	ped or printed name of person signing)
		President
	(Title o	f person signing)