

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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09/27/18--01018--013 **35.00

And

R. WHITE OCT 1 - 2018 ZOIR SEP 27 MH ID: 54 SECNETARY SESTATE

COVER LETTER

Division of Corporations SUBJECT: FDO Home Services Inc Name of Corporation DOCUMENT NUMBER: P10000047106 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Felipe D Ossa Name of Contact Person FDO Home Services Inc Firm/Company 1152 Overcash Dr Address Dunedin, FL 34698 City/State and Zip Code felipe@fdohomepro.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727)204-2671
Area Code & Daytime Telephone Number Felipe D Ossa Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section

FILED

Articles of Amendment to Articles of Incorporation of

2018 SEP 27 AM 10: 54

FDO Home Services Inc		58	ECRETARY DE STATE
	e of Corporation as current	ly filed with the Florida l	Dept of State SEE. FL
P10000047106			
	(Document Number of	f Corporation (if known)	
ursuant to the provisions of section 60's Articles of Incorporation:	7.1006, Florida Statutes, this	Florida Profit Corporatio	on adopts the following amendment(s)
If amending name, enter the new i	name of the corporation:		
		<u> </u>	The new
ume must be distinguishable and co Corp.," "Inc.," or Co.," or the desig ord "chartered," "professional associ	radion Coro Inc. or '	(a) I was a second and	orporated" or the abbreviation poration name must contain the
6. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		1152 Overcash Dr. Dui	nedin, FL 34698
	,		
Enter new mailing address, if appl	licable:		
(Mailing address MAY BE A POST	OFFICE BOX)		
If amending the registered agent ar	adlam annihtamad acc		
new registered agent and/or the ne	w registered office address:	ess in Florida, enter the n	isme of the
Name of New Registered Agent	Yan Huang		
Print of their regulation agent			
	(Florida stre		
	1152 Overcash Dr., Dunedi	•	34698
New Registered Office Address:		City)	, Florida
	'	C11,77	(Zīp Code)
v Registered Agent's Signature, if cl	hanging Registered Agent:		
ereby accept the appointment as regist	ered agent. I am familiar w	ith and accept the obligation	ons of the position.
	the tax		
	197		
	Signature of New Re	gistered 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	P	Felipe D Ossa	1152 Overcash DR, Dunedie, FL
Add			
Remove			
2) X Change	<u> </u>	Lina M Devia	1152 Overcash Dr, Dunedin, FL
Add			
Remove			
3) X Change	D	Yan Huang	1152 Overcash Dr., Dunedin, FL
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		Anna es	
Add			
Remove			

E. If amending or adding (Attach additional sheet	s, if necessary). (Be spec	er change(s) here:			
	President with 60% Shar	•			
Shareholder Lina M Devia	, v-president with 20% sh	ares	. <u>.</u>		·
Shareholdr Yan Huang, Di	rector with 20% shares			**	
			 		
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			-	 -	
				, ,	 -
					
					
					
					
			·		
					
		<u> </u>			
·			_ _	 -	
			<u>.</u>	-	
provisions for impleme	ies for an exchange, recla	ussification, or ca	ncellation of issued he amendment itse	<u>i şhares,</u> H:	
(if not applicable, i	idicate N/A)			<u></u>	
			 		
		···		·	
		<u> </u>		_ .	_
					
					··· <u>-</u>

The date of each amendment(s	09/23/2018 3) adoption:	, if other than the
date this document was signed.	,	, if trader than the
Effective date if applicable:	09/25/2018	
interior date ir apprearie.	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this c Department of State's records.	late will not be fisted as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendment sufficient for approval.	:(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following staten for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
Felipe D Ossa, Lina	a M Devia and Yan Huang "	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	ier
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
	a director, president or ther officer – if directors or officers have not been	
	cted, by an incorporator if in the hands of a receiver, trustee, or other countried fiduciary by that fiduciary)	ırt
	Felipe D Ossa	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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