P10000053983

(Re	questor's Name)	·. <u></u>
(110	,	
(Add	dress)	
(Ad	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	· · · · · · · · · · · · · · · · · · ·	
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
(00)	,	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
	•	

Office Use Only



600205226726

04/28/11--01036--020 **35.00



Amend C.COULLIETTE

JUN 03 2011

EXAMINER

COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Serenity Home Solution	s Inc
DOCUMENT NU	JMBER:	P10000053983	3
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		Mark Guerette	
	N	ame of Contact Person	
	Sereni	ity Home Solutions Inc	
		Firm/ Company	
	283	32 Shaughnessy Dr	
		Address	
	W	ellington FL 33414	
		ity/ State and Zip Code	
	isaveho	uses@gmail.com	
	E-mail address: (to be used	for future annual report notification)	··
For further informa	ition concerning this matter,	please call:	
	Mark Guerette	at (561)3	37-5779
Name	of Contact Person	Area Code & Daytime Te	elephone Number
Enclosed is a check	for the following amount m	ade payable to the Florida Depa	rtment 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)
Mailing Ad		Street Address	
Amendment Section		Amendment Section	
	Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee FL 32314		Clifton Building 2661 Executive Center Circ	la.
1 attanassee	PT 47414	Job L Executive Center Circ	IP .

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

26 May 4, 2011

MARK GUERETTE SERENTIY HOME SOLUTIONS INC 2832 SHAUGHNESSY DR WELLINGTON, FL 33414

SUBJECT: SERENITY HOME SOLUTIONS INC

Ref. Number: P10000053983

We have received your document for SERENITY HOME SOLUTIONS INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You will have to submit the first page of your amendment form in order to process your filing. How would we know what you are trying to amend without the name of the corporation? Please locate the missing page, complete it and mail the 3 pages with a copy of this letter to my attention.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 411A00010796

HECENED

11 MAY 26 AM 9: 43

SECRETARY OF STATE



June 1, 2011 **36** May 4, 2011

FLORIDA DEPARTMENT OF STATE Division of Corporations

MARK GUERETTE SERENTIY HOME SOLUTIONS INC 2832 SHAUGHNESSY DR WELLINGTON, FL 33414

SUBJECT: SERENITY HOME SOLUTIONS INC

Ref. Number: P10000053983

We have received your document for SERENITY HOME SOLUTIONS INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You will have to submit the <u>first page</u> of your amendment form in order to process your filing. How would we know what you are trying to amend without the name of the corporation? Please locate the missing page, complete it and mail the 3 pages with a copy of this letter to my attention.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 411A00010796

HEOFINATION Complete application.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	Serenity Home Solutions	Inc
DOCUMENT NUM	ИВЕR:	P10000053983	
The enclosed Article	es of Amendment and fee a	are submitted for filing.	
Please return all corn	respondence concerning th	is matter to the following:	
_		Mark Guerette	
	<u> </u>	Name of Contact Person	
	Seren	ity Home Solutions Inc	
		Firm/ Company	
_		PO Box 213173	
		Address	
	West Pa	Im Beach FL 33421-3173	
_	C	City/ State and Zip Code	
	isaveho E-mail address: (to be use	ouses@gmail.com	
For further informati	on concerning this matter,	please call:	
М	ark Guerette		37-5779
Name of	f Contact Person	Area Code & Daytime Tel-	ephone Number
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	iment 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 Add Amendment Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Serenity Home Solutions Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P10000053983 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) _, Florida_ (Citv) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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>	<u>Name</u>	Address	Type of Action
SEC	John Ledesma	1451 W. Cypress Creek Rd Suite: 300 Ft Lauderdale FL 33309	_ ☑ Add _ ☐ Remove
SEC_	Pedro Vargas	1451 W. Cypress Creek Rd Suite: 300 Ft Lauderdale FL 33309	_ ☑ Add □ Remove
			Add Remove
		ge, reclassification, or cancellation of iss	
	ons for implementing the amendant of applicable, indicate N/A)	nent if not contained in the amendment i	itsell:

The date of each amendmen	nt(s) adoption: April 22, 2011
Effective date if applicable:	April 25, 2011 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
The amendment(s) was/w action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/w action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_Apr	il 25, 2011
Signature_	Mark Swrett
	y a director, president or other officer – if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Mark Guerette
	(Typed or printed name of person signing)
	President
	(Title of person signing)