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(Re	equestor's Name)	
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Amend Cus 10 9.29.14

COVER LETTER

Division of Corporations				
NAME OF CORPORATION: H+H MOVETS, INC DOCUMENT NUMBER: 46-1249385				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
PAUL HARRISON Name of Contact Person H+H MOVERS, INC. Firm/ Company 1080 SW I TEMPACE Address Pompano BEACH, FL. 33060 City/ State and Zip Code HARRY—CDALACE Q VAHOO.COM E-mail address: Ito Kensed for future annual report notification)				
E-mail address: no be used for luture annual report notification)				
For further information concerning this matter, please call:				
PAUL IHARRISON Name of Contact Person at (454) 663-1429 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)				

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



August 7, 2014

PAUL HARRISON H & H MOVERS, INC. 1080 SW 1 TERRACE POMPANO BEACH, FL 33060

SUBJECT: H & H MOVERS, INC. Ref. Number: P12000088573

We have received your document for H & H MOVERS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 714A00016937



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

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ORIGINAL AMASSEE FLORIDA

June 11, 2014

PAUL HARRISON H & H MOVERS, INC. 1080 SW 1 TERRACE POMPANO BEACH, FL 33060

SUBJECT: H & H MOVERS, INC. Ref. Number: P12000088573

We have received your document for H & H MOVERS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The last page is missing.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 114A00012611

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment co Articles of Incorporation



H+H MOVERS, INC.	
(Name of Corporation as currently filed with the Florida Dept. of	State)
(Document Number of Corporation (if known)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit</i> 6 its Articles of Incorporation:	Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profess word "chartered," "professional association," or the abbreviation "P.A."	' or "incorporated" or the abbreviation sional corporation name must contain the
B. Enter new principal office address, if applicable:	SWI TERRACE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	NO BEACH FL 33060
	W 1 TERRACE 10 BEACH, FL 33060
D. If amending the registered agent and/or registered office address in Florida, new registered agent and/or the new registered office address:	
Name of New Registered Agent PAUL HARRISON	
1080 SW TERRACE (Florida street address)	
New Registered Office Address: POMPANO BEACH (City)	, Florida 33060
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept 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)

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 <math>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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
_X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	PR¥5.	HARVEY SILVERSTEIN	LLILSWIB TERRACE FORT LAUDERDAUE, FL 33315
2) Change Add Remove	<u>P</u>	PAUL HARRISON	1080 SW 1ST TER COMPANO BEACH FL 33060
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	1.
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adopt	tion;	, ii other than the
date this document was signed.	r -	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption.of Amendment(s)	C(GHECK-ONE)	
If he amendment(s) was/were adopted by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.	
	ed by the shareholders through voting groups. The following statement the 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 Haevey SiLV	reaster and Paul Harrison (voting group)	
[d by the board of directors without shareholder action and shareholder	
action was not required.	d by the incorporators without shareholder action and shareholder	
Dated 7 / 15	5/14	
Signature	tou	
selected, b	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	<u></u>
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	_