P1300017458

(Re	equestor's Name)	
(Ac	ldress)	
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TO ACENOMILEBUE SUPFICIENCY OF FILING DIVISION OF CRETINATION

JUN 05 2013 R. WHITE



COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: The H CORPORATION OF JACKSONVILLE, INC. DOCUMENT NUMBER: P130000/7458
DOCUMENT NUMBER: 130000 /7 458
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Awtitory Hunt Name of Contact Person
Name of Contact Person
T
Firm/ Company
7035 PHILPS HWY #22
11001033
Jacksonuille, Fl 32216 City/ State and Zip Code
City/ State and Zip Code
Perfect House Keeping JAX @ 9MA; / COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Anthony Hunt at 964 424 3460 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Bigcup \\$52.50 Filing Fee \\ \text{Certificate of Status} \\ (Additional copy is enclosed) \\ (Additional Copy is enclosed) \\ (Additional Copy is enclosed)

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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Articles of Amendment

FILED

	Articles of Inco	rporation	13 JUN -5	PH 3: 21
The H Corner	of the state of	TICKCHUIL	, A FREIARY O	- 11 - 0- 34 Е-Статы
The H Orporation as currently	filed with the Flo	rida Dent of State)	THE AHASSEE	FLORINA
	men with the Pit	(tua Dept. of State)	—; »,	- COMBUA
P13000017458			# ·	<u>.</u>
(Document Number	of Corporation (if I	(nown)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this F	lorida Profit Corporat	tion adopts the following	ing amendment(s) to
A. If amending name, enter the new name of the	corporation:			
	torporation.			
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	orp," "Inc," or "C	o". A professional co .A."	orporation name mus	t contain the
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)		7635 PH:1	11PS Hwy #	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>80X</u>)			- -
D. If amending the registered agent and/or regis new registered agent and/or the new registered.		ss in Florida, enter th	e name of the	_
Name of New Registered Agent				
	(Florida stree	et address)		
N		-		
New Registered Office Address:	(City)	, F	lorida <u>(Zip Code)</u>	_
	(5)		(sup cont)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agen	Registered Agent: 1. I am familiar wi	ith and accept the obliq	gations of the position	
Signature of	New Registered Ag	gent, if changing		

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

X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>S</u> _	TABO GANDY	9536 Princeton St. Blod.
Add			JACKSWUILLE, FI 32256
X Remove			· ·
2) K Change	P	Elowise Hunt	92/6 Leith OR.
Add			JACKSONVIlle, F1 32208
Remove			
3) _ Change			
Add			
Remove			
t) GI			· ·
4) Change			
Add			
Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

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(Attach additional sheets, if necessary).	(Be specific)
	(22 2200 910)
	
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f an amendment provides for an exch	nange reclassification or cancellation of issued shares
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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The date of each amendment(s) adoption:		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each 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	(voting group)	
	(voting group)	
action was not required. The amendment(s) was/were ado action was not required.	epted by the board of directors without shareholder action and shareholder epted by the incorporators without shareholder action and shareholder	
Dated_ 6/5	113	
Signature(By a di	irector, president or other officer – if directors or officers have not been	
selected	d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	TREASURE	
	(Title of person signing)	