P13000027457

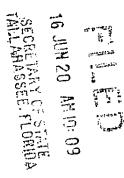
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: HOME DIMPROVEMENT SERVICES OF SWF DOCUMENT NUMBER: P13000027457 CORP
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Melissa Palacias Melissa Palacias Mame of Contact Person Services Inc Firm/Company 5270 Golden Coate Parkway Address Address City/ State and Zip Code MPACCOUNTACTAX (2) yallob. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melissa Palagios at 39 331-8718 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 Certificate of Status Certified Copy (Additional copy is enclosed) \$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 Circle
Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

(Docu	ument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the	corporation:
	The new
"Corp.," "Inc.," or Co.," or the designation "Conword "chartered," "professional association," or th	
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AL	
	क्रिक्
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	ov)
(Mutting uturess MAT BE A TOST OF FICE B	Aces
D. If amending the registered agent and/or regist new registered agent and/or the new registere	tered office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re	egistered Agent: I am familiar with and accept the obligations of the position.

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.

Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	VP Benita Reyes Salaza	Naples, FL 34120
Add		Naples, FL 34120
Remove		1971 - Audit (1971 - 19
2) Change		
Add		
Remove		
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)
	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(g 	
	

The date of each amendment(s) add	untion:	H	181	16	, if other than the
date this document was signed.			 		, it other than the
Effective date <u>if applicable</u> :	(no mor	re than 90 day	after am	endment file a	date)
Note: If the date inserted in this blo document's effective date on the Dep			statutory	filing requirer	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ON	<u>(E</u>)			
☐ The amendment(s) was/were adop by the shareholders was/were suff		ers. The num	ber of vot	es cast for the	amendment(s)
☐ The amendment(s) was/were appr must be separately provided for e					
"The number of votes cast for	or the amendment(s)	was/were suf	ficient for	approval	
by	(voting group			, 31 	
	(voting group	<i>)</i>)			
The amendment(s) was/were adopt action was not required.	ted by the board of d	directors with	out shareh	older action a	nd shareholder
The amendment(s) was/were adoptetion was not required.	ted by the incorporat	tors without s	hareholde	r action and sh	nareholder
Dated 06/10	4/16				
Dated_OG/.	X		-		
Signature					
(By a dir	ector, presiden or ot				
	by an incorporator - d fiduciary by that fi		ds of a rec	civer, trustee,	or other court
арротке	a nauciary by mac n	iduciary)	9		
	Devair	0 6	oar	cia	Sandoval
_	(Typed or	printed name	of person	signing)	
		Pho	MI	V 0-0	
_		(Title of per	son signir	ng)	1