P13000077079

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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2022 MAR 21 PM 4: 56
SECRETARY OF STATE

्र 3/28/2022

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPO	RATION: ALL HANDYMA	N SERVICES SOUTH FLO	ORIDA INC		
DOCUMENT NUM	D12000077070				
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	LISETT MURCH				
		Name of Contact Person	n		
	LISETT MURCH EA PA				
	Firm/ Company				
	6635 W COMMERCIAL BLVD STE 210				
	Address				
	TAMARAC FL 33319				
		City/ State and Zip Cod	e		
	P.LISETT@YAHOO.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:at (2633711		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.C	illing Address pendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Division The Co 2415 f	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		



RECEIVED

2022 HAR 2 | PH 12: 20

SECRELARIA DE STATE TALLAHASSEE, FL

February 25, 2022

LISETT MURCH 6635 W COMMERCIAL BOULEVARD SUITE 210 TAMARAC, FL 33319

SUBJECT: ALL HANDYMAN SERVICES SOUTH FLORIDA INC

Ref. Number: P13000077079

We have received your document for ALL HANDYMAN SERVICES SOUTH FLORIDA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can check only one (1) box regarding the adoption of amendment.

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.

Letter Number: 722A00004726

Claretha Golden Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

FILED

ALL HANDYMAN SERVICES SOUTH FLORIDA INC

2022 HAR 21 PM 4: 56

(Name of Corporation as cur P13000077079	rrently filed with the Florida Dept. of STATE TALL AHASSEE, FI
	aber of Corporation (if known)
	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
All About Interiors & More Inc	The new
name must be distinguishable and contain the word "corporation" Inc.," or Co.," or the designation "Corp," "Inc.," or "Co"chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	n/a
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	n/a
(Mailing address MAY BE A POST OFFICE BOX)	uva
 If amending the registered agent and/or registered office new registered agent and/or the new registered office ad 	
Name of New Registered Agent	
Name of New Registered Agent	
(Flor	rida street address)
n/a	uai sir ees tatur essy
New Registered Office Address:	. Florida (Zip Code)
	(iii)
New Registered Agent's Signature, if changing Registered A	Agent:
I hereby accept the appointment as registered agent. I am fam.	uliar with and accept the obligations of the position.
Signature of N	New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 Fixecutive 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	<u>PT</u>	<u>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change			-	
Add				
Remove				

Attach <i>additi</i>	or adding additional Articles, enter change(s) here: onal sheets, if necessary). (Be specific)
·	
	· · · · · · · · · · · · · · · · · · ·
If an amenda	nent provides for an exchange, reclassification, or cancellation of issued shares, or implementing the amendment if not contained in the amendment itself:
(if not a	oplicable, indicate N/A)
	· ·

••

The date of each amendment(s) acd date this document was signed.	loption:	, if other than the
Ç		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requiren partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the fficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	03/15/2022 Oscar Gonzanos	
Signature	Oscar Companyor:	
(By a di selected	rector, president or other officer – if directors or officers hal, by an incorporator – if in the hands of a receiver, trustee, ed fiduciary by that fiduciary)	
	OSCAR GONZAZEZ	
	OSCAL GOVZAZEZ (Typed or printed name of person signing)	
	(les sent	
	(Title of person signing)	