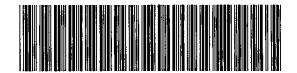
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing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

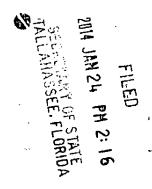
Office Use Only



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1/30/14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BLANKSHI	P SERVICES C	ORP
DOCUMENT NUMBER: P1300009846		
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	tter to the following:	
VALLERIE L BLA	NKINSHIP	
	Name of Contact Persor	
BLANKSHIP SEF		
	Firm/ Company	
6461 SW 15TH C	OURT	
	Address	
POMPANO BEAG	CH FL 33068	
	City/ State and Zip Code	;
joel@jcwoodservices	.com	
	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
VALLERIE L BLANKINSHIP	at (954	, 793-2817
Name of Contact Person		le & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\text{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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendi Division Clifton 2661 Ex	Address ment Section of Corporations Building secutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

TEILED

urrently filed with the Florida Dept. of St	2014 JAN 24 PM 2:	• -
arready men wan the riorida Dept. of St	ate)	πE
	TALL AHASSEE, FLOR	RÍDA
Number of Corporation (if known)	8	
06, Florida Statutes, this <i>Florida Profit Con</i>	poration adopts the following amenda	nent(s) 1
e of the corporation:		
SCORP	The ne	ew
in the word "corporation," "company," of ion "Corp," "Inc," or "Co". A profession," or the abbreviation "P.A."	or "incorporated" or the abbreviation nal corporation name must contain to	on he
applicable: REET ADDRESS)		
ible: FFICE BOX)		
	ter the name of the	
	_	
VALLERIE L BLANKINSHII		
6461 SW 15TH CT		
(Florida street address)		
POMPANO BEACH	_, Florida 33068	
(City)	(Zip Code)	
	e of the corporation: CORP In the word "corporation," "company," of ion "Corp," "Inc," or "Co". A profession," or the abbreviation "P.A." applicable: EET ADDRESS) ble: FICE BOX) or registered office address in Florida, engistered office address: /ALLERIE L BLANKINSHIP 6461 SW 15TH CT (Florida street address)	Number of Corporation (if known) 06, Florida Statutes, this Florida Profit Corporation adopts the following amendment of the corporation: S CORP The non-interest of the corporation, "company," or "incorporated" or the abbreviation "Corp," "Inc," or "Co". A professional corporation name must contain to n," or the abbreviation "P.A." applicable: BEET ADDRESS) ble: FFICE BOX) Or registered office address in Florida, enter the name of the registered office address: /ALLERIE L BLANKINSHIP 6461 SW 15TH CT (Florida street address)

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PRES	S VALLERIE L BLANKINSHIP	6461 SW 15TH CT
Add			POMPANO BEACH FL 33068
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
·Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·

E. <u>If an</u>	mending or adding additional Artic	cles, enter change(s) here:
	ach additional sheets, if necessary).	(Be specific)
N/A		
		——————————————————————————————————————
	-	
	•	
	,	
		
F. <u>If an</u>	n amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
pro	ovisions for implementing the amen- (if not applicable, indicate N/A)	dment if not contained in the amendment itself:
N/A	(y not apprecable, material WA)	
14//3		
	,	

The date of each amendment(s) a	Adoption: 12-30-13
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	lopted by the board of directors without shareholder action and shareholder
action was not required.	opted by the incorporators without shareholder action and shareholder
Dated_12/30	/2013
Signature	k.
(By a c selecto	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	VALLERIE L BLANKINSHIP
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)