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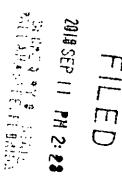
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Amend

SEP 1 4 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Lutes Services, Inc			
DOCUMENT NUM	P14000068269 BER:			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	Kyle Lutes			
		Name of Contact Persor	1	
	Lutes Services, Inc.			
		Firm/ Company		
	2123 Santa Lucia Circle	, -		
	Address			
	Melbourne, FL 32935			
		City/ State and Zip Code	e	
klute	st@cfl.rr.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	e call:		
Kyle Lutes		321 at (759-9852)	
Name	of Contact Person	at () Area Code & Daytime Telephone Num		
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:	
☐ \$35 Filing Fee	□\$43.75 Filing Fee & 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)	
Am Div P.C	iling Address cendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Lutes Services, Inc.			
(Name of Corporation as curre	ently filed with the Florida Dept. of State)		
	(6)		
(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the follow	ing amendm	ent(s
A. If amending name, enter the new name of the corporation:	<u>.</u>		
		The new	¢.
name must be distinguishable and contain the word "corpore" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," o word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name mus		
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
	723	2 2	
)***	- <u>35</u>	_,
C. Enter new mailing address, if applicable:	71.7 	. <u> </u>	<u>.</u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	-
	· ·	4D -W	П
		. 100	
D. If amending the registered agent and/or registered office a	iddress in Florida, enter the name of the	•	
new registered agent and/or the new registered office add			
Name of New Registered Agent			
(Florida	i street address)		
	Pl. dd		
New Registered Office Address:	(City), Florida, Florida	n Code)	
	• •		
New Registered Agent's Signature, if changing Registered Ag	ent:		
I hereby accept the appointment as registered agent. I am famili	iar with and accept the obligations of the position	•	
Signature of Ne	w 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 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	David Patrick Williams	241 Wading Bird Circle
\(\text{\lambda} \) \(<u>-</u> -		Palm Bay, FL 32908
Remove			
2) Chorus	Т	James Lee Solmonson	905 Maceo Rd
2) Change			Cocoa, FL 32927
Add			
Remove			
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	dding additional Art sheets, if necessary).	(Be specific)			
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	. 		·		
					
					
		· · · · · · · · · · · · · · · · · · ·		···	
			· · · ·		
an amendment	t provides for an excl	hange, reclassificat	ion, or cancellation	of issued shares,	
provisions for it	mplementing the ame	ndment if not conf	ained in the amend	ment itself:	
(if not applie	cable, indicate N/A)				
	-				
	·-·	<u>,</u> ,			
	144				
					*, -

The date of each amendmen	t(s) adoption:	, if other than the
date this document was signed	1.	
Effective date if applicable:	September 2, 2018	
Enective date i <u>i applicane</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes east for the amendmenterere sufficient for approval.	s)
	ere approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	eni
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required. □ The amendment(s) was/we	re adopted by the board of directors without shareholder action and shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	ier
action was not required.		
-	ember 2, 2018	
Dated		
	W/ ///	
S	By a director president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	
	Kyle Lutes	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·