P/50000/6420

<u>.</u> (Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	` ;

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COVER LETTER 2

TO: Amendment Section
Division of Corporations

NAME OF CORPO	KATION:	NDYMAN SERVICE, INC			
DOCUMENT NUM	BER: P15000016420				
The enclosed Article:	s of Amendment and fee are su	ibmitted for filing.			
Please return all corre	espondence concerning this ma	atter to the following:			
	WILLIAM WILLIAMS				
	Name of Contact Person				
	WILLIAM'S HANDYMAN SERVICE, INC.				
		Firm/ Company			
	14426 COUNTY ROAD 56	1A			
	<u> </u>	Address			
	CLERMONT, FL 34715				
		City/ State and Zip Cod	le		
OLS	SONINS@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 (352			
Name of Contact Person			ode & 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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	iling Address	Street Address			
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314		2661 Executive Center Circle			
		Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

FILED

94篇 JUN 18 PM 3:55

The new or "incorporation name must contain the
prporation adopts the following amendment(s) The new or "incorporated" or the abbreviation
The new or "incorporated" or the abbreviation
or "incorporated" or the abbreviation
or "incorporated" or the abbreviation
or "incorporated" or the abbreviation
or "incorporated" or the abbreviation onal corporation name must contain the
nter the name of the
, Florida
(Zip Code)
he obligations of the position.
, ,

If amending the Officer's 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 Doc	
X Remove	V	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	D	FRANK HUTCHINSON	14426 COUNTY ROAD 561A
X Add			CLERMONT, FL 34715
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Remove			
5) Change	.		
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
2000	
If an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) and date this document was signed.	doption:	, if other than the
	15/15	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date we partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) officient for approval.	
	proved 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	u .	
-	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
06/15/15		
Dated		
Signature X	Wian V. Williams	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	WILLIAM WILLIAMS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	