## P16000010519

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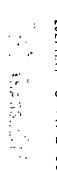


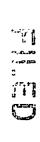
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: UNDER PRESSUR	E CLEANING & RES	TORATION INC		
DOCUMENT NUM	D14000010510	12-00	•		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	Timothy Newlon CPA				
		Name of Contact Per	son		
	Newlon Services PA				
		Firm/ Company			
	PO Box 907				
		Address			
	San Antonio, FL 33576				
		City/ State and Zip C	ode		
	tnewlon@newloncpa.com				
	E-mail address: (to be use	ed for future annual rep	ort notification)		
For further informatio	on concerning this matter, pleas		588-3844		
Name	of Contact Person	at ( Area	) 588-3844 Code & Daytime Telephone Number		
inclosed is a check fo	or the following amount made p				
\$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)		
<u>Mai</u>	iling Address		et Address		
	endment Section		endment Section		
Division of Corporations			Division of Corporations The Centre of Tallahassee		
	. Box 6327 ahassee, FL 32314		5 N. Monroe Street, Suite 810		
1 311	anassec, FL 94914	441	o in momoc onect, ounc 810		

Tallahassee, FL 32303

## **Articles of Amendment** to Articles of Incorporation of

UNDER PRESSURE CLEANING & RESTORATION INC	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P16000010519	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
HANLEY'S HOMETOWN SOLUTIONS 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 "P.,	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Trincipul office undress <u>Stost Be A STREET ADDRESS</u> )	202
	· . = 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ن ع سمع
maning united states of the box	
	<del> </del>
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	ont.
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
ing ty file.	The second of th

Check if applicable

<sup>☐</sup> 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)

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 Do	<u>u</u>	
X Remove	<u>y</u>	Mike Jos	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change				
Add	·	_		
Remove				
4) Change				
Add		_	•	
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

muen manninnan sincer	additional Artics, if necessary).	(Be specific)				
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an amendment prov	ides for an exch	ange, reclassific	ation, or cancell	ation of issued s	hares,	
provi <u>sions for</u> implen	nenting the amer	idment if not co	ntained in the a	<u>mendment itself</u>	· <u>·</u>	
(if not applicable,	indicate N/A)					
						_
				·		

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following store each voting group entitled to vote separately on the amendment(s).	
"The number of votes ea	st for the amendment(s) was/were sufficient for approval	
by	,"	
	(voting group)	
04/05/20 Dated		
selec	director, president or other officer – if directors or officers have not led, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	been r court
	Clayton Hanley	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	