P17000014272

(Re	equestor's Name)	
(Ad	ldress)	
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(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
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TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: SERVICE 2 CORP DOCUMENT NUMBER: P17000014272 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **CARLOS E PEREZ** Name of Contact Person **SERVICE 2 CORP** Firm/ Company 2869 BOATING BLVD Address KISSIMMEE, FL 34746 City/ State and Zip Code SERVICECORP2@OUTLOOK.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CARLOS R PEREZ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee S35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SERVICE 2 CORP	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P17000014272	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2869 BOATING BLVD
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	KISSIMMEE, FL 34746
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address. Name of New Registered Agent	
(Fl. i.i.	reet address)
(Fiorial Si	reet address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Signature of New	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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	DORIS ZERPA	2869 BOATING BLVD
Add	-		KISSIMMEE, FL 34746
X Remove			
2) Change	S	ZULANDRY LEAL	2869 BOATING BLVD
X Add			KISSIMMEE, FL 34746
Remove			
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
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If an amendment j	provides for an excl	hange, reclassifi	cation, or cancel	lation of issu	ed shares.	
provisions for im	plementing the ame	endment if not c	ontained in the a	mendment i	tself:	
(if not applica	able, indicate N/A)					
			13.			
				-		
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			· — —			

	08/14/2018	
, -	adoption:	if other than t
late this document was signed.		
Effective date <u>if applicable</u> :		
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/14/20	018	
Dated		
Signature	Out III	
` •	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court	
appe	ointed fiduciary by that fiduciary)	
	CARLOS E PEREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	