7000039182

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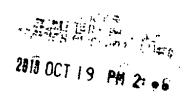


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COVER LETTER



TO: Amendment Section Division of Corporations

NAME OF CORPORA	MON: <u>Stricklun</u>	1 Ruplin 3 Hon	ne Services, Inc.
	e: <u> P1700003918</u>		
The enclosed Articles of .	Amendment and fee are sul	bmitted for filing.	
Please return all correspo	ndence concerning this mat	ter to the following:	
	Michael Ma	Name of Contact Person 15446 Lune FL 3262	
		Name of Contact Persor	1
	7191 NW	15416 Lane	
	(hiet)md	FL 326.2	<u></u>
		Address	
_		City/ State and Zip Code	
	E-mail address: (to be de	be 115004 A	
For further information co	oncerning this matter, pleas	se call:	
Milinue Name of G	Martin _	at (<u>352</u> Area Co) 944 - 6593 de & Daytime Telephone Number
Enclosed is a check for th	ne 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)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Will non-	,
2018 OCT 19 PM	`≀∩ E ∉

Articles of Incorporation of

0	1/2 PM 2: • 6		
Strictand Cootings	Home Services Inc.		
(Name of Corporation as current	tly filed with the Florida Dept. of State)		
P170000 3919	3 7_		
(Document Number)	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s 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 "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	719) NW 15410 Lane		
(Principal office address MUST BE A STREET ADDRESS)	Chiefland FL 3262L		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7191 NW 15446 lune		
	7191 NW 15746 lune Chickland F C 32626		
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the		
new registered agent and/or the new registered office addre	<u>ss:</u>		
Name of New Registered Agent Middlefu	- ; Middleton P.A.		
1464 M	Tarket St.		
(Florida s	street address)		
New Registered Office Address: Talluhus	City), Florida FL 32312		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.	nt: r with and accept the obligations of the position.		
	4		

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:	ne, una ou	my smill, or to the man	
X Change	PT	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>	Address
1) Change	P_{-}	Portices Magvire	831 Queen Rd- St. Augustin EL 3708
Add Remove			54. HUGUSTING LUS/086
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			**************************************
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	-		
	<u> </u>	<u> </u>		<u>. </u>
				
	 ,			
		<u> </u>		
	4		<u>-</u>	
				
				
. If an amendment provides for an excl	iange, reclassification,	or cancellation of is	sued shares,	
provisions for implementing the ame	ndment if not containe	d in the amendmen	t itself:	
(if not applicable, indicate N/A)				
		-		
·				

	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this opartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment flicient for approval.	.· (s)
	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	der
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated _ 	M 12016	
Signature	5	
(By a di selected	rector, president or other officer – if directors or officers have not been a high properties of the first part of the first properties of the following properties of the first properties of the fir	
	Main Middlete Esa	
	(Typed or printed name of person signing)	
	Allungses Fiducian	
	(Title of person signing) Signing as Paner at DH. Con Ma.	
	Signing as Paner of All Con Me	of 1 thet