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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Moder	n Home Se	rvices, Inc
DOCUMENT NUMBE	r: <u>P1700005</u>	3697	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
_	Edw	Name of Contact Person	
_	Modern	1 Home Ser Firm/Company	vices, Inc
	1936 Bru	ce B Dowl	os Blvd. PMB # 332
_	Wesley	Chapel, FL City/ State and Zip Code	<u>. 33543-9a6a</u>
	E-mail address: (to be us	@ me . Com sed for future annual report	notification)
For further information c	concerning this matter, pleas	se call;	
Edwin Name of	Delgado Contact Person	at ( <u>813</u> Area Co	de & Daytime Telephone Number
Enclosed is a check for the	he following amount made [	payable to the Florida Depa	irtment of State:
□ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	g Address Iment Section		Address ment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

of			
Modern Home Serv	rices, Inc		
(Name of Corporation as currently	y filed with the Florida Dept. of State)		
P17000053	697		
(Document Number o	f 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:			
NIA	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:	1936 Bruce B. Downs Blvd		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	PMB # 332		
	Wesley Chapel, FL 33543-9262		
C. Paramora di da di da di Caratta di Caratt			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1936 Bruce B. Downs Blvd		
	Pm B # 33a		
	Wesley Chapel, Fl 33543-9262		
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address			
Name of New Registered Agent Melissa I	Delaado		
1936 Bruce	B. Downs Blvd, PMB#332		
New Registered Office Address: Wesley Chap	e . Florida 33543-9060 (City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.		
Signature of New R	Pegist Tred 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	<u>PT</u> <u>Johr</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change		Andre Thomas	20225 Natures
Add			Spirit DR.
X Remove			Tampa, FL 33647
2) Change		Melissa Delgado	1936 Bruce B. Dawn
Add		·	Blvd, PMB #332
Remove			Wesley Chapel, Fl 33543
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
D			

If amending or adding additional At (Attach additional sheets, if necessary)	tucies, enter change(s) here: (Be specific)	
1110		
N/ ri		
		_
If an amendment provides for an ex-	change, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
N/A	<del></del>	

The date of each amendment(s) adoption:	, if other than th
Effective date if applicable:  (no more than 90 days after amendment file date)	
(no more than 90 days after amenament file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory tiling requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8.21.17	
Signature Edwin Dolando	
(By a director, president or other officer - if directors or officers have not be	
selected, by an incorporator - if in the hands of a receiver, trustee, or other c	ourt
appointed fiduciary by that fiduciary)	
Educa Dolando	
(Typed or printed name of person signing)	
Prosident	
(Title of person signing)	