

| (Requestor's Name)                      |
|---|
| (Address)                               |
|   |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |

Office Use Only



800303808618

09/26/17--01012--002 \*\*85.00

FILED

SEP 27 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR            | ATION: ANTONIO VASQ  | UEZ CLEANING SERVIC   | JES INC   |  |  |  |
|---------------------------|--|---|---|--|--|--|
| DOCUMENT NUMB             |  |   | *****   |  |  |  |
|                           | of Amendment and fee are su  | bmitted for filing.   |   |  |  |  |
| Please return all corresp | ondence concerning this ma   | tter to the following:  |   |  |  |  |
|                           | ANA L FERREIRA   |   |   |  |  |  |
| -                         |  | Name of Contact Person  | n   |  |  |  |
| ,                         | ANAS ACCOUNTING SERVICES CORPORATION                                     |   |   |  |  |  |
| -                         |  | Firm/ Company   | · · · · · · · · · · · · · · · · · · ·   |  |  |  |
|                           | 100 WALLACE AVE SUITI  | E 245   |   |  |  |  |
| -                         | <del></del>  | Address   |   |  |  |  |
| \$                        | SARASOTA, FL 34237   |   |   |  |  |  |
| -                         | <del>-</del> .   | City/ State and Zip Cod   | e   |  |  |  |
| RAMC                      | OSHANA@COMCAST.NET   | r   |   |  |  |  |
|                           | <del></del>  | sed for future annual report  | notification)   |  |  |  |
|                           |  |   |   |  |  |  |
| For further information   | concerning this matter, pleas  | se call:  |   |  |  |  |
| ANA L FERREIRA            |  | 941<br>at (   | 870-3400  |  |  |  |
| Name o                    | f Contact Person   | Area Co   | de & Daytime Telephone Number   |  |  |  |
| Enclosed is a check for   | 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 &<br>Certified Copy<br>(Additional copy is<br>enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)    |  |  |  |
| Amer<br>Divis<br>P.O.     | ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314 | Amend<br>Divisio<br>Clifton<br>2661 E                                       | Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301 |  |  |  |

## Articles of Amendment to Articles of Incorporation of

## FILED 17 SEP 26 PM 1: 12 SECRETARY OF SAME THE ATASSET FEORIBA

ANTONIO VASQUEZ CLEANING SERVICES INC

| (Name of Corporation as currently filed v  | vith the Florida Dept. of State)                     |
|--|--|
| <b>\$</b> 17000071265  |  |
| (Document Number of Corpor   | ration (if known)                                    |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:   | Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corporation:  |  |
| ANTONIO VASQUEZ HANDYMAN SERVICES IN C   | The new  |
| name must be distinguishable and contain the word "corporation," "co<br>"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A<br>word "chartered," "professional association," or the abbreviation "P.A." | mpany," or "incorporated" or the abbreviation        |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  |  |
| <del></del>  |  |
| <del></del> .  |  |
| C. Enter new mailing address, if applicable:   |  |
| (Mailing address MAY BE A POST OFFICE BOX)   | <del></del>  |
| ····   |  |
|  |  |
| D. If amending the registered agent and/or registered office address in F  | lorida, enter the name of the                        |
| new registered agent and/or the new registered office address:   |  |
| Name of New Registered Agent   |  |
|  |  |
| (Florida street addre  | 288)   |
| New Registered Office Address: (City)  | . Florida  |
| (City)   | (Zip Code)   |
|  |  |
| New Registered Agent's Signature, if changing Registered Agent:  |  |
| I hereby accept the appointment as registered agent. I am familiar with and  | accept the obligations of the position.              |
|  |  |
|  |  |
| Signature of New Registere   | d 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  |           |             |          |
| <u>X</u> Add                  | <u>sv</u>    | Sally Smith |           |             |          |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Nar</u>  | <u>ne</u> |             | Address  |
| 1) Change                     |              | _           |           |             |          |
| Add                           |              |             |           |             |          |
| Remove                        |              |             |           |             |          |
| 2) Change                     |              |             |           | <del></del> |          |
| Add                           |              |             |           |             |          |
| Remove                        |              |             |           |             |          |
| 3 ) Change                    |              |             |           | <del></del> |          |
| Add                           |              |             |           |             |          |
| Remove                        |              |             |           |             |          |
| 4) Change                     |              |             |           |             |          |
| Add                           |              |             |           |             |          |
| Remove                        |              |             |           |             |          |
| 5) Change                     |              |             |           |             |          |
| Add                           |              |             |           |             | <u> </u> |
| Remove                        |              |             |           |             |          |
| б) Change                     |              |             |           |             |          |
| Add                           | -            |             |           |             |          |
| Remove                        |              |             |           |             |          |

| Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific)  |
|--|---|
|  |   |
|  |   |
| ······································   |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
| ·  |   |
|  |   |
|  |   |
| f an amendment provides for an exch      | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| (if not applicable, indicate N/A)        | noment a not contained in the amenginent users.   |
| vy mar approxime, material (17/1)        |   |
| Cy and approxime, martine (971)          |   |
| A was approxime, minetic (174)           |   |
| Cy nor appreciate, inniciae (1741)       |   |
| A mar approxime, inniciale (17/1)        |   |
| A mar approxime, inniciale (1741)        |   |
| Cy ma appreciate, minetic (1711)         |   |
|  |   |
|  |   |
| Cy man approxime, inniciale (17/1)       |   |

| The date of each amendment(s) adoption:   | , if other than the           |
|---|-------------------------------|
| late this document was signed.  |                               |
| 09/19/2017  |                               |
| Effective date if applicable:   |                               |
| (no more than 90 days after amendment file date)  |                               |
| <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this dedocument's effective date on the Department of State's records.  | ate 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.   | s)                            |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):   | ent                           |
| "The number of votes cast for the amendment(s) was/were sufficient for approval   |                               |
| by  |                               |
| (voting group)  |                               |
| <ul> <li>□ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.</li> <li>□ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.</li> </ul> | er                            |
| 09/19/2017 Dated  |                               |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary)  |                               |
| ANTONIO VASQUEZ LOPEZ   |                               |
| (Typed or printed name of person signing)   |                               |
| PRESIDENT   |                               |
| (Title of person signing)   |                               |