## P17000016506

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ac                     | ldress)            |           |
| (Ac                     | ldress)            |           |
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SECRETARY STATE

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## COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO           | RATION:  | SERVICES INC   |  |
|-------------------------|--|--|--|
| DOCUMENT NUMI           | P17000076506   |  |  |
| The enclosed Articles   | of Amendment and fee are su  | ibmitted for filing.   |  |
| Please return all corre | spondence concerning this ma   | tter to the following:   |  |
|                         | NORMA MORAN  |  |  |
|                         |  | Name of Contact Perso  | n  |
|                         |  | Firm/ Company  |  |
|                         | 10005 NORTH 9TH ST   |  |  |
|                         |  | Address  |  |
|                         | TAMPA FL 33612   |  |  |
|                         |  | City/ State and Zip Cod  | e  |
| ММА                     | RIAJJIMENEZ@GMAIL.C  | MC   |  |
| <del></del>             | E-mail address: (to be us  | sed for future annual report                                       | notification)  |
| For further information | n concerning this matter, pleas  | se call:   |  |
| NORMA MORAN             |  | 813  | 3911383  |
| Name (                  | of Contact Person  |  | de & Daytime Telephone Number  |
| Enclosed is a check fo  | r the following amount made p  | payable to the Florida Depa  | artment of State:  |
| S35 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)     |
| Ame<br>Divi<br>P.O.     | ling Address Indiment Section Ission of Corporations Box 6327 Inhassee, FL 32314 | Amenc<br>Divisio<br>Clifton<br>2661 E                              | Address Innent Section on of Corporations Building Executive Center Circle assee, FL 32301 |

## Articles of Amendment to Articles of Incorporation of

## ANGIE'S PLUS SERVICES INC

|  | filed with the Florida Dept. of State)                          |
|--|---|
| P17000076506   |   |
| (Document Number of  | Corporation (if known)  |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:   | Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation:  |   |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I | Co". A professional corporation name must contain the           |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | 10005 NORTH 9TH ST TAMPA FL 33612                               |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )  | ALL ALL PI  |
| D. If amending the registered agent and/or registered office address:  | ess in Florida, enter the name of the                           |
| Name of New Registered Agent   |   |
| (Florida stre  | et address)   |
| No. 2 Parist and Office Address  | Florida   |
|  | City) (Zip Code)  |
| New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w                                   |   |

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.

| Evample: 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 (Check One) | Title     | <u>Name</u>   | <u>Addres</u> s    |
| 1) Change                  | ٧         | NELSON RIVERA | 10005 NORTH 9TH ST |
| X Add                      |           |               | TAMPA FL 33612     |
| Remove                     |           |               |                    |
| 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 Articles, enter change(s) here: (Attach additional sheets, if necessary).—(Be specific)   |
|---|
|   |
| CURRENTLY NELSON RIVERA INCLUDE FOR VICEPRESIDENT   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A) |
| N/A   |
|   |
|   |
|   |
|   |
|   |
|   |

| 07/22/2018   |
|--|
| The date of each amendment(s) adoption:  |
| Effective date if applicable: 07/22/20/3  (no more than 90 days after amendment file date)   |
| (no more than 90 days after amenament file date)   |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.   |
| Adoption of Amendment(s) (CHECK ONE)   |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.   |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): |
| "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.  |
| ■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |
| Dated 07/32/2018  Signature  |
| Signature Offiner  |
| (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 court appointed fiduciary by that fiduciary)   |
| (Typed or printed name of person signing)  |
| (Typed or printed name of person signing)  |
| Title of person signing)   |
| (Title of person signing)  |