## P1700093559

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## **COVER LETTER**

TO: Amendment Sect Division of Corpo			
NAME OF CORPOR	RATION: PSR Home & Busi	iness Solutions	
DOCUMENT NUMI	BER: P17000093559		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	·
	Pablo Santiago Rodriguez		1
	-	Name of Contact Person	
	PSR Home & Business Solut	tions	
		Firm/ Company	
	224 Primrose Dr.	r in Company	
			<u> </u>
	Davenport, FL 33837	Address	
		City/State and Zi= Code	<u>.</u>
		City/ State and Zip Code	
psrho	omesolutions@yahoo.com		1
	E-mail address: (to be us	sed for future annual report i	notification)
For further informatio	n concerning this matter, pleas	se call:	
Pablo Santiago Rodriguez		at (	307-6144
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depar	rtment of State:
□ \$35 Filing Fee	□\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amendi Division Clifton 2661 E:	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2017

PABLO SANTIAGO RODRIGUEZ 224 PRIMROSE DR DAVENPORT, FL 33837

SUBJECT: PSR HOME & BUSINESS SOLUTIONS, INC.

Ref. Number: P17000093559

We have received your document for PSR HOME & BUSINESS|SOLUTIONS, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please have Pablo S. Rodriguez sign the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 317A00024777

## Articles of Amendment to Articles of Incorporation of

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to

PSR HOME & BUSINESS SOLUTIONS, INC.

(Name (	of Corporation as currently filed	l with the Flopida D	ent. of State)
P17000093559		Euro Ji	<del>和 -8 戸</del> 秋 <b>0</b> 5
<del>,                                    </del>	(Document Number of Corp	oration (if known).	ńi
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florid</i>	la Profit Corporation	adopts the following amendment(s
A. If amending name, enter the new na	ime of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co".	A professional corp	
B. Enter new principal office address, (Principal office address MUST BE A S			<del></del>
C. Enter new mailing address, if application (Mailing address MAY BE A POST)  D. If amending the registered agent and application (Mailing address)	OFFICE BOX)  d/or registered office address in	Florida, enter the	name of the
new registered agent and/or the new	Pablo Santigo Rodriguez		
Name of New Registered Agent	224 Primrose Dr		
	(Florida street add	dress)	<del>-  </del>
New Registered Office Address;	Davenport		33837
	(City)		(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nd accept the obligat	ions of the position.
	Signature of New Registe	ered Agent, if changir	ng

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:	, and ou	ry oman, or as an rad.		
X Change	<u>PT</u>	John Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	P	Pablo Santiago	224 Primrose Dr.	
X Add			Davenport, FL 33837	
Remove				
2) Change	V	Elba E. Rivas Burgos	224 Primrose Dr.	
Add			Davenport, FL 33837	
Remove				
3) Change		<del></del>		
Add				
Кепюче				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
A 21				
6) Change		<u> </u>		
Add				
Remove				

E. If amending or adding additional Articles; enter change(s) here:	1
(Attach additional sheets, if necessary). (Be specific)	
·	
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<del></del>	<del> </del>
	<u>    i                                </u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itse	<u>l shar'es.</u> <u>lf:</u>
(if not applicable, indicate N/A)	ì
	,
	· {
	<del></del>

The date of each amendmendate this document was signed		, if other than the
-	- 11/20/20 <b>J7</b>	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amen ere sufficient for approval.	dment(s)
	re approved by the shareholders through voting groups. The following ed for each voting group entitled to vote separately on the amendment	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	re adopted by the board of directors without shareholder action and sha	reholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	older
12/01 Dated	1/2017	
Signature _		
(I s	By a director, president or other officer – if directors or officers have no elected, by an incorporator – if in the hands of a receiver, trustee, or other properties of incorporator if in the hands of a receiver, trustee, or other properties of incorporation in the hands of a receiver.	
	Pablo Santiago Rodriguez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	