P1800008654

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TALLAHASSEE, FLORIDA

FEB 08 2019

S. YOUNG

COVER LETTER

CO: Amendment Section Division of Corporations	
NAME OF CORPORATION: BOTYS Prentes Handyman DOCUMENT NUMBER: P1800008654	(
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Ports Perts Nandy Man Interpretation Ports Person Firm/ Company Address Address City/ State and Zip Code Dents a 30 and . Com [E-mail address: (to be used for future annual report notification)	y
For further information concerning this matter, please call:	
Name of Contact Person at (813), 785-0840 Area Code & Daytime Telephone Number	_
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status (Additional copy is enclosed) \$35 Filing Fee & Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address	

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 Ame	endment •	
to Articles of Incor	- cperation	
Borys Puentes Hand	dyman The.	
(Name of Corporation as currently)	filed/with the Florida Dept. of State)	
Y 18000008654	Secretary (CE) and a	
(Document Number of C	.orporation (II known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:	/	
· · · · · · · · · · · · · · · · · · ·	N/A	The new
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 "P.	o". A professional corporation name	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA.	18 FEB -7
	:	
D. If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent Name of New Registered Agent		RIDA I
(Florida stree	t address)	
New Registered Office Address:	, Florida	···
(C	City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the pos	sition.
Signature of New Reg	gistered 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	Frank Diaz	4019 W NORTH A S
X_ Add			Tanpa FL 3360°
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)
N/n-
NA
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)
k / later
N/4

The date of each amendment(s) adoption: 1-30-18	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 block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	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 east 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 1-30-18 Signature Amy Huercy	
(By 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)	
appointed findiciary by that findiciary)	
Bonys tventes	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<u></u>