P18000016004

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: HANDYMAN ON	DUTY CORP						
	MBER: P18000016004							
	The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all cor	теspondence concerning this ma	tter to the following:						
	LEONARDO FIGUEIREDO							
		Name of Contact Persor	1					
	SOLUTION ADVISING LL	С						
		Firm/ Company						
	5728 MAJOR BLVD, STE 6							
		Address						
	ORLANDO, FL 32819							
		City/ State and Zip Code	<u> </u>					
		eny, suite and bip cour	•					
	SERVICES@SOLUTIONADVISING.COM							
	E-mail address: (to be us	sed for future annual report	notification)					
For further informat	ion concerning this matter, pleas	se call:						
THAISE FERREIR	A	at (<u>407</u>	286-5595					
Nam	e of Contact Person	Area Coo	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 & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303					

Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as cu	rrently filed with the Flor	ida Dept. of State)	•
P1\$000016004		,	
(Document Nur	mber of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corpo	oration adopts the following amendm	ient(s) t
A. If amending name, enter the new name of the corporati	ion:		
HANDYEX CORP		The new	w
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	'o". A professional corpo	porated" or the abbreviation" Corp., oration name must contain the wor	u ud
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS))	:	
C. Enter new mailing address, if applicable:		•	
(Mailing address MAY BE A POST OFFICE BOX)			
	 		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a Name of New Registered Agent			
	rida street address)		
New Registered Office Address:	(Citv)	, Florida(Zip Code)	
	(,		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: niliar with and accept the o	phligations of the position.	
Signature of	New Registered Agent, if cl	hanging	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.012	0 (11) (e), F.S.		

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)

Example:

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>	John Doo	2		
X Remove	<u>v</u>	Mike Jor	<u>ies</u>		
X Add	<u>sv</u>	Sally Sm	<u>iith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) Change		_		 _	
Add					
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)
CHANGE THE COMPANY'S NAME FROM: HANDYMAN ON DUTY CORP TO: HANDYEX CORP
EVERYTHING ELSE STAYS THE SAME
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)

	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	
	(no more than 90 days after amenament fue date	,
Note: If the date inserted in this bidocument's effective date on the De	ock does not meet the applicable statutory filing requiremen partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the an fficient for approval.	endment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
11/6/2	023	
Dated	Docustyned by:	
Signature	- Sur	
(By a di	rector, president or other officer - if directors or officers have	
	by an incorporator – if in the hands of a receiver, trustee, or	other court
appoint	ed fiduciary by that fiduciary)	
	Ricardo Silva Santos	
•	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	