## P18 0000 21390

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SECRETARY OF STATE TALLAHASSEE, FL

A. Butter

## COVER LETTER

TO: Amendment Section
Division of Corporations

š

NAME OF CORPORA	ATION: W&C HANDYMA	AN. CORP					
DOCUMENT NUMBI	ER: P18000021390						
	f Amendment and fee are su	bmitted for filing.					
Please return all corresp	ondence concerning this ma	tter to the following:					
		JOSE LEON					
_	Name of Contact Person						
	LBS LEON BUSINESS SERVICE LLC						
_	<u>-</u>	Firm/ Company					
	8333 W	MCNAB RD	STE 114				
_		Address	·-				
	TAMARAC FL, 33321						
_		City/ State and Zip (	Code				
	FLS.OF	FICE@LEONBUSINI	ESERVICES.COM				
_	E-mail address: (to be us	sed for future annual re	port notification)				
	concerning this matter, pleases	se call: at (	323-9074				
Name of	Contact Person	at ( Area	Code & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida (	Department of State:				
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status				
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 passee, FL 32314	An Div Th 24	cet Address nendment Section vision of Corporations e Centre of Tallahassee 15 N. Monroe Street, Suite 810 lahassee, FL 32303				

## Articles of Amendment to Articles of Incorporation of

FILED

W&C HANDYMAN, CORP 2021 JUN -4 PM 12: 57 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE
TALLAHASSEE, FL P18000021390 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: \_, Florida\_ (City)

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.

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 D	<u>0e</u>	
X Remove	$\underline{V}$	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP	_	CARLOS ALBERTO FERNANDEZ	3913 N 30TH WAY
X Add				HOLLYWOOD, FL 33021
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				_
Remove				
5) Change		_		
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

	<del></del> .			<del></del>	-
ADDING NEW MEMB	ER				_
THANK YOU					
				<del>-</del>	
· <del></del> ·		<del></del>		•••	
<del></del>		<del>.</del>			
F. If an amendment pro	vides for an exchang	ge, reclassificatio	n, or cancellation	of issued shares,	
if not applicable	menting the amendre, indicate N/A)	nent it not conta	ined in the amend	ment itself:	
		<del></del> -			
	·				-

The date of each amendment(s) adoption:	, if other than the
liffective date if upplies blo.	
(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	y filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of direct action was not required.	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of v by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	roups. The following statement ly on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by	<u>,</u>
by(voting group)	<del></del>
Dated $5/25/2021$	
Signature	
(By a director, president or other officer – if director selected, by an incorporator – if in the hands of a reappointed fiduciary by that fiduciary)  (Typed or printed name of person	eceiver, trustee, or other court
(Typed or printed name of perso	n signing)
airs fen	randel.
(Title of person signing)	