P180000 37899

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(Address)			
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Omend/ Name Change

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION:	UTMAN & SCREEN SEI	RVICES INC			
DOCUMENT NUM	IBER: P18000037899					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	CLAUDIA AVILA					
	Name of Contact Person					
	FIVE STAR HANDYMAN & SCREEN SERVICES CORP					
		Firm/ Company				
	6380 RADIO RD LOT 27					
	Address					
	NAPLES FL 34104					
		City/ State and Zip Cod	e			
FIV	ESTARHANDYSCREEN@G	SMAIL.COM	20 1			
	E-mail address: (to be us	sed for future annual report	notification)			
			 :n			
For further informati	on concerning this matter, pleas	se call:				
CLAUDIA AVILA	_	239 at (300-5131			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check t	or 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)			
- Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation \mathbf{of}

ly filed with the Florida Dept. of State)
of Corporation (if known)	
Florida Profit Corporation adopts the f	ollowing amendment(s) to
	The new
on," "company," or "incorporated" o "Co". A professional corporation nam "P.A."	r the abbreviation
CLAUDIA AVILA	N) == 0
6380 RADIO RD LOT 27	0 N
NAPLES FL 34104	25 - 25 - 25 - 25 - 25 - 25 - 25 - 25 -
PO BOX 385	12 18 20 12 12 12 12 12 12 12 12 12 12 12 12 12
NAPLES FL 34106	Allor
lress in Florida, enter the name of the	
reet address)	<u>_</u>
, Florida	
(City)	(Zip Code)
, Florida_	(Zip Code)
	on, " "company," or "incorporated" on "Co". A professional corporation name"P.A." CLAUDIA AVILA 6380 RADIO RD LOT 27 NAPLES FL 34104 PO BOX 385 NAPLES FL 34106 Aress in Florida, enter the name of the is: Areet address) (City)

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)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			***
Remove			<u> </u>
5) Change		_	
Add			
Remove			
6) Change			
Add	<u> </u>		
Remove			

(Au	mending or adding additional Articles, enter change(s) here: such additional sheets, if necessary). (Be specific)
1A	
-	
. lfa	n amendment provides for an exchange, reclassification, or cancellation of issued shares,
pr	ovisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
ΙA	

	05/01/2020	
The date of each amend date this document was s		, if other than the
Effective date if applica		BY THE DIVISION OF CORPORATIONS
		fier amendment file date)
	ed in this block does not meet the applicable state on the Department of State's records.	tutory filing requirements, this date will not be listed as the
Adoption of Amendmer	nt(s) (<u>CHECK ONE</u>)	
■ The amendment(s) wa action was not require		directors without shareholder action and shareholder
	as/were adopted by the shareholders. The number was/were sufficient for approval.	r of votes cast for the amendment(s)
	ns/were approved by the shareholders through vot rovided for each voting group entitled to vote sep-	
"The number of	votes cast for the amendment(s) was/were suffic	ient for approval
by		'''
	(voting group)	
	05/05/2020	
Dated_		
Signati	ure () audia Molica)
_	(By a director, president or other officer - if d	
	selected, by an incorporator – if in the hands (appointed fiduciary by that fiduciary)	of a receiver, frustee, or other court
	CLAUDIA AVILA CA	BALLERO
	(Typed or printed name of	person signing)
	PRESIDENT	
	(Title of person signing)	