P180000 46283

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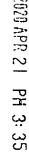
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COVER LETTER

INC

TO: Amendment Section

Amendment Section **Division of Corporations**

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION: DSCEOLA HOME IMPROVEMENT.	+
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Stephen Hayes Name of Contact Person OSCEDIA Home Improvement Inc Firm/Company 2950 CANDE CIVULE Address St Cloud FC 39772 City/State and Zip Code HAYES NOW E AMAIL. Com E-mail address: (to be used for future annual report notification)	•
For further information concerning this matter, please call:	
Stephen Hayes at (107), 908-8114 Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Street Address Amendment Section	

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation

to

	of
Osceola Home	Improvement Inc
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
019000	46283
(Document Numb	per of Corporation (if known)
,	
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co "chartered," "professional association," or the abbreviation "I	". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Frincipal Office address BIOST BEASTREET ADDRESS)	25
	20
C. Enter new mailing address, if applicable:	. ~ .:
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	P
	<u> </u>
	<u></u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ado	
Name of New Projection I to and	
Name of New Registered Agent	
(Florid	la street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A	uent:
I hereby accept the appointment as registered agent. I am fami	liar with and accept the obligations of the position.
	, , , ,
Signature of Ne	ew Registered Agent, if changing
Check if applicable	

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (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)

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	PT John I	<u>Doe</u>				
X Remove	<u>V</u> <u>Mike Jones</u>					
X Add	SV Sally Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	VP	Bonnie Hayes	2950 Chhoe Cir			
Add			St Cloud, FL 34772			
Remove	_					
2) Change	<u>S</u>	Bonnie Hayes	2950 CANOECIN			
Add			St Cloud (13477)-			
Remove Change	VP	StephenHayes	2950 CANOECIA			
X Add			St Cloud, KC 3477)			
Remove			2000 0			
4) Change		Stephen Hayes	2950 Canve Cir			
X Add			Stcloud, FC34772			
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Attach additional,	ding additional Arti sheets, if necessary).	(Be specific)	<u> </u>			
			<u> </u>			
						
<u> </u>						 -
<u>.</u>						
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•						
						
f an amendment	provides for an exch	ange, reclassific	ation, or cancell	lation of issued	shares,	
(if not application)	plementing the ame	nument ii not ço	ntamed in the a	menament itse	<u>II:</u>	
	,					
		•				
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			-	···		

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The date of each amendment(s) adoption:
Effective date if applicable: 3-27-200 (no more than 90 days after amendment file date)
(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 will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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)
Signature (By a 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) Stephen Layes (Typed or printed name of person signing) Vesiclest (Title of person signing)