P18000053505

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| : |
| |
| |
| |

Office Use Only

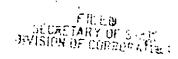


700316387717

06/02/18--01911--028 **85.00

DEVISION OF CORRESPONDED

AUG 21 2018



COVER LETTER

2010 AUG 20 PH 16 24

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: P&D HANDYMA | N SERVICES, INC | |
|-------------------------|---|---|--|
| | BER: P18000053505 | | |
| The enclosed Articles | of Amendment and fee are so | bmitted for filing. | |
| Please return all corre | spondence concerning this ma | tter to the following: | |
| | ESTELA MORALES | | |
| | | Name of Contact Person | 1 |
| | AXIOM ACCOUNTING, P. | A | |
| | | Firm/ Company | |
| | 4951 TAMIAMI TRAIL NO | • • | |
| | | Address | |
| | NAPLES, FL 34103 | | |
| | | City/ State and Zip Cod | <u> </u> |
| actal | amorales07(a,comeast.net | | |
| | - | sed for future annual report | notification) |
| | i. man dome, v. (10 de a. | sea an idiale dilitali report | Notification / |
| For further information | n concerning this matter, pleas | se call: | |
| ESTELA MORRALI | IS | 239 at (| de & Daytime Telephone Number |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | or the following amount made | payable to the Florida Depa | artment of State: |
| S35 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) |
| Am Div P.O | iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314 | Amend Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle |

Tallahassee, Fl. 32301

FIELD JECHETARY OF STALE SPYISION DE COSTIGNATIES

Articles of Amendment to Articles of Incorporation of

28H ALG 20 PH 14 24

| as currently filed with the Florida Dept. of State) |
|--|
| |
| t Number of Corporation (if known) |
| atutes, this Florida Profit Corporation adopts the following amendment(s) to |
| oration: |
| The new |
| "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A." |
| ESS) |
| |
| |
| office address in Florida, enter the name of the ice address: |
| |
| (Florida street address) |
| , Florida |
| (City) (Zip Code) |
| ered Agent: m familiar with and accept the obligations of the position. |
| re of New Registered 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: <u>X</u> Change | <u>PT</u> | John De | <u>se</u> | |
|-------------------------------|--------------|----------|-----------------|-----------------------|
| X Remove | <u>V</u> | Mike Jo | ones | |
| <u>X</u> Add | <u>sv</u> | Sally St | n <u>ith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) 🔀 Change | VP | | BELTRAN DEBORAH | 4110 23RD ST SW |
| Add | | _ | | LEHIGH ACRES FL 33976 |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 51 Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | _ | | |
| Remove | | | | |

| <u>Famending or addi</u> Attach <i>additional sh</i> e | rets, if necessary). | (Be specific) | | | | |
|---|---------------------------------------|-------------------------|------------------|---------------------------------------|---------------|---------------|
| | | | | | | |
| | | | | | | |
| | | | | | | · |
| | | | | | | |
| <u> </u> | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | | |
| | | | | | | · |
| | | | | . | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | - | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| <u>f an amendment pr</u> | ovides for an exc | <u>hange, reclassif</u> | ication, or cane | <u>cellation of issu</u> | ed shares. | |
| provisions for impl | ementing the amo le, indicate N/A) | endment if not c | ontained in the | <u>e amendment it</u> | <u>iself:</u> | |
| (i) and difference | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | . |
| | | | | | | |
| | | <u> </u> | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | · |

| The date of each amendment(s) date this document was signed. | adoption: | , if other than the |
|---|---|---------------------------|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the I | block does not meet the applicable statutory filing requirements, this date v Department of State's records, | vill not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): | |
| | st for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/were a action was not required. | dopted by the board of directors without shareholder action and shareholder | |
| ■ The amendment(s) was/were a action was not required. | dopted by the incorporators without shareholder action and shareholder | |
| Dated 7 - | 31-18 | |
| Signature | 2 P Rui | |
| selec | director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) | |
| | PEDRO P ROMERO | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |