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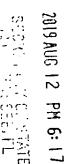
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: EPIC HOME DR	INC			
DOCUMENT NUMB	P19000053340				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
		ANA QUEZADA			
-	Name of Contact Person				
	EPIC HOME DR INC				
-		Firm/ Company			
	2585 28TH AVE SE				
-	Address				
_		NAPLES FL 34117			
		City/ State and Zip Cod	e		
	INF	O@SMART!JPACCOUN	T.COM 🗸		
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
ANA QUEZADA		239- at () 961-5517 de & Daytime Telephone Number		
Name o	f Contact Person	Area Co	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)		
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Ameno Divisio Cliftor	Address Imment Section In of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EPIC HOME DR INC

(Name of Corporation as currently file P19000053	
(Document Number of Corp	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	da Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", 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)	A professional corporation name must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) ———————————————————————————————————	2 PH 6: 17
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the
Name of New Registered Agent	
(Florida street aa	dress)
New Registered Office Address: (City,	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a	
Signature of New Regist	ered 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.

<u>X</u> 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>	<u>Addres</u> s
1) Change	S	DIANA R MARIN	5911 STAR GRASS LN
Add			NAPLES FL 34116
X Remove			
2) Change	Т	LUIS CHA	5911 STAR GRASS LN
Add			NAPLES FL 34116
X Remove			
3) Change	P	ANA QUEZA	8290 IBIS CLUB LN APT 907
Add			NAPLES FL 34104
X Remove			
4) Change	P	ANA QUEZADA	2585 28TH AVE SE
X Add			NAPLES FL 34117
Remove			
5) Change	S	FRANCISCO GUTIERREZ	6070 AUTUMN OAKS LN
X Add			NAPLES FL 34119
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
		· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·			
		<u> </u>	
		•	
			1.1
f an amendment provides for an exch provisions for implementing the ame	ndment if not contained	in the amendment its	self:
(if not applicable, indicate N/A)			
<u> </u>			

	08/07/2019	
The date of each amendment(s) a date this document was signed.	doption:	, if other than th
Effective date <u>if applicable</u> :		
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmen afficient for approval.	t(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	ment
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	opted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
08/07/20 Dated Signature _ `		
(By a selecte	director, president or other officer – if directors or officers have not been been been incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	ANA QUEZADA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	