P2100067307

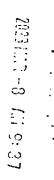
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TERE'S REMODE	LING SERVICE INC				
	BER: P21000067307	<u> </u>	·			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	TERESA TORRES					
		Name of Contact Persor	1			
	TERE'S HANDYWOMAN SERVICES INC					
		Firm/ Company				
	9319 TIFFANY TERRACE					
		Address	_ .			
	TAMPA, FL 33610					
		City/ State and Zip Code	e			
	TAVONCE4@HOTMAIL.C	ОМ				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas		455-6658			
	of Contact Person	at (at () 455-6658 de & Daytime Telephone Number			
Name	of Comact reison	Alea Co	de & Daytime Telephone Namber			
Enclosed is a check for	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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

TERES LAWN SERVICE INC

TERES LAWN SERVICE INC	
(Name of Corpora	tion as currently filed with the Florida Dept. of State)
P21000067307	20221:2-8 1: 0.22
(Doc:	ument Number of Corporation (if known)
•	da Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the	corporation:
TERE'S HANDYWOMAN SERVICES INC	The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," c," or "Co". A professional corporation name must contain the word reviation "P.A."
B. Enter new principal office address, if applicable of the principal office address MUST BE A STREET AL	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u>(A)</u>
D. If amending the registered agent and/or regist new registered agent and/or the new registere	tered office address in Florida, enter the name of the d office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida(City) (Zip Code)
	(ειιγ) (Σιρ ειιαε)
New Registered Agent's Signature, if changing R	egistered Agent:
	I am familiar with and accept the obligations of the position.
Sia	anative of New Ragictared Agent, if changing
Sig	nature of New 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.

Example: X Change	PT	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
I) Change				
Add				
Remove				
2) Change	_			
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach addi	g or adding additional i tional sheets, if necessar,	y). (Be specific)			
		 			
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. If an ameno	iment provides for an e	exchange, reclassif	ication, or cancell	ation of issued shar	es.
provisions	for implementing the a	amendment if not o	contained in the a	mendment itself:	
(i) not	applicable, indicate N/A	1			
.					
					

	01/01/2024	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
0 Effective date <u>if applicable</u> :	/01/2024	
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requiren Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The following entitled to vote separately on the amendation	
"The number of votes co	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
03/04/20 Dated	24	
(By-selec	edirector, president or other officer – if directors or officers hated, by an incorporator – if in the hands of a receiver, trustee, inted fiduciary by that fiduciary)	
	TERESA TORRES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	