

P21 0000 74000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

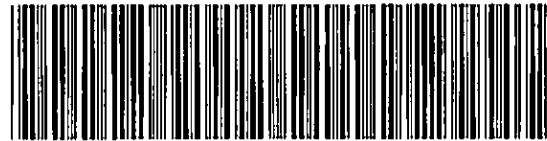
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Returned the By-laws,  
Corporate Resolutions &  
Citrus County Business  
tax receipt to Reid  
Norris on 9-24-2021

Office Use Only

DC  
09-24-21



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2021 SEP -9 AM 5:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09/22/2021  
JH

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: MACKER D'S HANDYMAN CORPORATION  
DOCUMENT NUMBER: P21000074000

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

REID NORRIS  
Name of Contact Person  
MACKER D'S HANDYMAN CORPORATION  
Firm/ Company  
7160 N. PEARL PT.  
Address  
HERNANDO FL 34442  
City/ State and Zip Code  
fnorris154@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

REID NORRIS at (352) 422 6960  
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:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

FILED

Articles of Incorporation

2021 SEP -9 AM 5:46

MACKER D'S HANDYMAN CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000074000

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the 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)

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 Doe

X Remove                      V              Mike Jones

X Add                      SV              Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- 1) Change      CTSP      REID NORRIS      7160 N. PEARL PT  
X Add                      HERNANDO FL 344142  
Remove                      \_\_\_\_\_
- 2) Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
Add                      \_\_\_\_\_  
Remove                      \_\_\_\_\_
- 3) Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
Add                      \_\_\_\_\_  
Remove                      \_\_\_\_\_
- 4) Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
Add                      \_\_\_\_\_  
Remove                      \_\_\_\_\_
- 5) Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
Add                      \_\_\_\_\_  
Remove                      \_\_\_\_\_
- 6) Change      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
Add                      \_\_\_\_\_  
Remove                      \_\_\_\_\_

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

1. ~~ADDING BYLAWS COPIES ENCLOSED~~
2. ~~ADDING CORPORATE RESOLUTION  
FOR SIGNING AUTHORITY~~
3. ~~ADDING FEDERAL EIN 87-2298574~~
4. ~~ADDING CITRUS COUNTY BUSINESS  
TAX RECEIPT #99990269572~~

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,  
provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

The date of each amendment(s) adoption: 08/24/2021, if other than the date this document was signed.

Effective date if applicable: 08/24/2021  
(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.

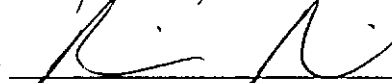
☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ 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)

Dated 08/24/2021

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)

REID NORRIS  
(Typed or printed name of person signing)

PRESIDENT, CEO, TREASURER, SECRETARY  
(Title of person signing)