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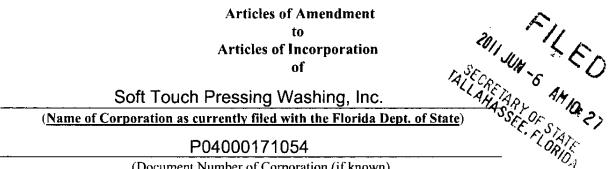
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• TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION:S	oft Touch Pressure Washir	ng, Inc.
DOCUMENT NUMBER:		P04000171054	
The enclosed Articles	of Amendment and fee a	are submitted for filing.	
Please return all corre	spondence concerning th	is matter to the following:	
		Jack McCallum	
	ľ	Name of Contact Person	
	Soft Touc	ch Pressure Washing, Inc.	
•		Firm/ Company	
		138 Hammond Drive	
		Address	
.··		phyrhills, FL 33541	
	C	City/ State and Zip Code	
	Softtouc E-mail address: (to be use	hpw1@yahoo.com annual report notification)	
For further informatio	n concerning this matter,	please call:	
Jac	k McCallum	αι ()	99-8693
Name of C	Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check for	or the following amount n	nade payable to the Florida Depart	ment of State:
✓ \$35 Filing Fec	\$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 Addr		Street Address	
Amendment S		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	2

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



71054 Corporation (if known rida Statutes, this Flow orporation: ashing & Painting, ord "corporation," "nation "Corp," "Inc,"	ida Profit Corpora	The new
rida Statutes, this Flow orporation: ashing & Painting, ord "corporation," "	ida Profit Corpora	The new
orporation: ashing & Painting, ord "corporation," "	Inc.	The new
ashing & Painting,	company," or "inc	
ord "corporation," "	company," or "inc	
ord "corporation," "	company," or "inc	
nal association," or th		essional corporation
e:		
DRESS)		
		
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		<u>-</u>
red office address in l	Clarida enter the t	iame of the
office address:	torida, circi tile i	iame of the
(Florida street add	lress)	
	Flori	da
(City)	(Zip Code)	
i am jamiliar with and	uccepi ine obligati	ons of the position.
	red office address in Foffice address: (Florida street address)	red office address in Florida, enter the noffice address: (Florida street address) , Flori (City) (Zip Code)

Signature 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	nding or adding additional Articles		
(attach a	additional sheets, if necessary). (Bo	e specific)	
		-	
			
E Kana			
provis	mendment provides for an exchan- ions for implementing the amendm		
(if	not applicable, indicate N/A)		
_			
	 	· · · · · · · · · · · · · · · · · · ·	

The date of each amendmen	t(s) adoption: May 1, 2011
	(date of adoption is required) May 1, 2011
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<u> </u>	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_May	1, 2011
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Jack Mccallum
	(Typed or printed name of person signing)
	President
	(Title of person signing)