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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CLEANING SOLU	UTIONS SERVICE INC	
	BER: P06000049480		
	s of Amendment and fee are su	bmitted for filing.	•
Please return all corre	espondence concerning this ma	tter to the following:	
	JUAN CARLOS RAMIREZ		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	<u> </u>
	CLEANING SOLUTIONS S		
		Firm/ Company	·
	PO BOX 884	Pilili Company	
		Address	
	VERO BEACH, FL 32961		
		City/ State and Zip Cod	e
DAI	PIDOTAXSERVICES@GMAI	I COM	
	-	sed for future annual report	notification)
	17 man address (w/ ve at	sed for facure annual report	nonneadon)
For further information	on concerning this matter, pleas	se call:	
JUAN CARLOS RA	MIREZ	772	501-4343
Name	of Contact Person	Area Co) 501-4343 de & Daytime Telephone Number
Enclosed is a check f	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)
Ma	niling Address		Address
An	nendment Section		Iment Section
	vision of Corporations		on of Corporations
	D. Box 6327 Jahassee, FL 32314		Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



CLEANING SOLUTIONS SERVICE INC

(Document Number of Corporation (if known) arsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment of Articles of Incorporation: If amending name, enter the new name of the corporation: The new time 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 ord "chartered." "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)	(<u>Name of Corporation</u>	n as currently filed with the Florida	Dept. of State)
resuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment Articles of Incorporation: If amending name, enter the new name of the corporation: The new 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 ord "chartered." "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: (Inc., and the professional association, and the professional corporation name of the corporation of the abbreviation and the professional corporation name of the enter new mailing address of the professional corporation name of the new mailing address of the professional corporation name of the new 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:	06000049480		್ಷ ಬ
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(Florida street address) New Registered Office Address:, Florida			
(Florida street address) New Registered Office Address:, Florida	Name of New Registered Agent		
New Registered Office Address:, Florida			
New Registered Office Address:, Florida		(Florida street address)	
	W - B - 1 - 1 - 200 - 1 - 1 - 1	•	
(Exp estat)	New Registered Office Address:	(City)	
		(0.0,)	(Bip code)
	w Registered Agent's Signature, if changing Regis	tered Agent:	
v Registered Agent's Signature, if changing Registered Agent:	reby accept the appointment as registered agent. I d	am familiar with and accept the obliga	ations of the position.
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v Registered Agent's Signature, if changing Registered Agent: reby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	Organia.	i i i i i i i i i i i i i i i	····o

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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Τ	JUAN CARLOS RAMIREZ	PO BOX 884
X Add			VERO BEACH, FL. 32961
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach add	g or adding additional A itional sheets, if necessary	y). (Be specific)			
					
					
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£	dment provides for an e	vahanaa vaalaasii	Saation or annoal	llation of issued she	. mas
provisions	s for implementing the a	mendment if not	contained in the a	mendment itself:	illes,
(if not	applicable, indicate N/A)			
			 .		
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The date of each amendment	07/24/2015 s) adoption:	, if other than the
date this document was signed.	7.00	
Effective date if applicable:	4/30/2015	
Effective date it applicable.	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this de Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment re sufficient for approval.	(s)
☐ The amendment(s) was/wern must be separately provided	e approved by the shareholders through voting groups. The following statem d for each voting group entitled to vote separately on the amendment(s):	ent
	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	ma de kur Mussar	
(B	y a director desident or other officer directors or officers have not been	
	lected, by an incorporator if in the hands of a receiver, trustec, or other coupointed fiduciary by that fiduciary)	ir1
цρ		
	MARIA DE JESUS ALVAREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	