P18000004090

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COVER LETTER

Division of Corporations NAME OF CORPORATION: Herchan cleaning & muftigensizes. OURP. DOCUMENT NUMBER: P180000 6090 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: armando Herchan Delgado Name of Contact Person Firm/ Company 2706 W JAKE Are Tampa, Fil Tampa FL 33607

City/ State and Zip Code Armandv. merchan & YaHov. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person

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: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment

to

Articles of Incorporation

of

MERCHAN CLEANING AND MULTISERVICE CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P18000006090
(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: FAMILY Merchan Huffigenville CORP 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: 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) (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)

Example:

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.

X 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)	Title	<u>Name</u>		Address
1) Change		NA		
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. <u>If amen</u> (Attach <i>d</i>	ding or adding additional Art	icles, enter change(s) here: (Be specific)		
1	J / A.			
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. <u>If an ал</u>	nendment provides for an exc	nange, reclassification, or cano	ellation of issued shares,	
provisi	ions for implementing the ame not applicable, indicate N/A)	ndment if not contained in the	amendment itself:	
L I.	1A			
	7 1			
				
				
				
		· 		

The date of each amendment(s) adoption:	03/19/2025	, if other than the
date this document was signed.		
Effective date if applicable:	5/19/2025	
	(no more than 90 days after amendmen	n file date)
Note: If the date inserted in this block does document's effective date on the Department		equirements, this date will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
☐ The amendment(s) was/were adopted by the action was not required.	ne incorporators, or board of directors with	out shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for		for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each votice.	the shareholders through voting groups. The agroup entitled to vote separately on the	
"The number of votes cast for the an	nendment(s) was/were sufficient for approv	val
by	roting group)	" -
Dated 03 19 20	25 Problemen	
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• •	ary by that fiduciary)	
	Typed or printed name of person signing	2)
	Presidente	-
	(Title of person signing)	