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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

1 ,

NAME OF CORPO	RATION: B7P COMMECIA	. CLEANING, INC			
DOCUMENT NUM	P18000017674				
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	ANGELA P BOJORGE				
		Name of Contact Person	1		
	-	Firm/ Company	 		
	311 NW 61ST AVENUE				
	Address				
	MIAMI, FL 33126				
		City/ State and Zip Cod	e		
bpei	nc2018@outlook.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	on concerning this matter, pleas	e call:			
ANGELA BOJORGE		786	474 5721		
Name	of Contact Person	Area Code & Daytime Telephone N			
Enclosed is a check for	or the following amount made p	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)		
Am Div P.C	iling Address endment Section ision of Corporations b. Box 6327 lahassee, F1, 32314	Amene Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Corporation	n as currently filed	with the Florida Den	orsall fee 28 P to 56
B7P COMMECIAL CLEANING, INC	us currently thea	The same of the sa	SCUBUTARY OF SE
(Decume)	ent Number of Corpe	ration (if known)	TALLAHASSEE ELOGIE
Pursuant to the provisions of section 607,1006, Florida Starticles of Incorporation:			dopts the following amendment(s) to
. If amending name, enter the new name of the cor	poration:		
3&P COMMERCIAL CLEANING, INC			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	" "Inc," or "Co".	ompany," or "incorpe A professional corpore	orated" or the abbreviation the
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	o		
). If amending the registered agent and/or registere new registered agent and/or the new registered of		Florida, enter the nan	ie of the
Name of New Registered Agent	 -	<u> </u>	
			
	(Florida street add	*ess)	
New Registered Office Address:	(City)		, Florida (Zip Code)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent. I	stered Agent:	d accept the obligation	•
Signat	ture of New Register	ed 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)

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 Da	<u>xc</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				.
2) Change		 -		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).				
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f an amendment provides for an exch	ange, reclassification	n, or cancellation of i	ssued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	<u>ndment il not contai</u>	ned in the amendmen	<u>it itself:</u>	
	· · · · · · · · · · · · · · · · · · ·			
		·	·	
		-		

	02/26/2018	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	21/2018	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(ufficient for approval.	s)
	proved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	enl
	t for the amendment(s) was/were sufficient for approval	
bv	<u>, </u>	
	(voting group)	
	opted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
02/26/201 Dated	8	
selecto	director, president or other officer—if directors or officers have not been ed, by an incorporator—if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	rt
	ANGELA P BOJORGE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	