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(Re	equestor's Name)	
(Ad	idress)	<u>_</u>
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(Čit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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STORETARY OF STATE

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Keys TO Clean Incorporate
DOCUMENT NUMBER: PA200046725
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sandra Sugrez Name of Contact Person
Firm Company
14 beech wood dr. Address
Key West F2, 33040 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sandra Suarez (Owher) at (786) 563-5356 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 \$\Bigcup \\$43.75 Filing Fee & Certificate of Status \$\Bigcup \\$43.75 Filing Fee & Certificate of Status \$\Bigcup \\$43.75 Filing Fee & Certificate of Status \$\Bigcup \\$64 Certificate of Status \$\Bigcup \\$65 Certificate of Status \$\B
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to **Articles of Incorporation**

Leus to Clean Inc	orporated
(Name of Corporation as currently	filed with the Florida Dept. of State)
Daa00046735	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
OIA	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	n la
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:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	a address)
New Registered Office Address: \(\sqrt{\gamma} \)	, Florida
New Registered Agent's Signature, if changing Registered Agent:	Ziţv) (Zip Code)
I hereby accept the appointment as registered agent. I am familiar wi	in ana ассері ine опиданопѕ ој ine position.
N 14	gistered Agent, if changing
Signature of New Reg	gistered 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)

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	n Doc	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP_	Sabrina Smithwick	913 A Fort St Apt #101
Add			Key Nest K 33040
Remove			,
2)Change	<u>VP</u>	Bill Roberts	16 Beechwood dr.
Add			Kay West Fz, 33040
Remove Change	D	Jeffrey J. Carbonell	The Beech wood dr.
Add		1	Key West FE 33040
Remove			College Calelle
4) Change		/	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Artic Mach additional sheets, if necessary).	(Be specific)
n19	
<u> </u>	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
NA	
1.	
	<u> </u>

The ite of each amendment(s) adoption:	, if other than the
Effective date if applicable: 09-01-2022 (no more than 90 days after amenda	nent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
(I) The amendment(s) was/were adopted by the incorporators, or board of directors was not required.	ithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes can by the shareholders was/were sufficient for approval.	est for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on t	
"The number of votes east for the amendment(s) was/were sufficient for app	rovai
by \(\beta\) \(\beta\) (voting group)	
Dated 9-1-2022	
Signature (By a director, president or other officer – if directors or of selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	
Sandra Suarez (Typed or printed name of person sign	ing)
President-owner- I (Title of person signing)	
(Title of person signing)	