P180004330

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18 JUL 16 PH 3: 28 SECRETARY OF STATE ALLAHASSEE, FLORIDA

JUL 1 8 2018 S. YOUNG

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORA	rion: <u>Coqui</u>	N'S Cleanin	ng Service Corp		
DOCUMENT NUMBER: P18000042230					
The enclosed Articles of A	Amendment and fee are sub	omitted for filing.			
Please return all correspo	ndence concerning this mat	ter to the following:			
М	A SOCORRO AGUAYO				
		Name of Contact Person	1		
_	SA	Firm/ Company	SA		
_45	16 LUKE AVE 14	Rainbow i	or Nw fortwalton beech		
	S.A.	Address			
Đ	ESTIN, FLORI DA 3 25 41.	Fort WAlto	n Beach 32548 S.A		
_		City/ State and Zip Code			
COCOARTI	ayo.8@gmail.com				
		ed for future annual report	notification)		
			,		
For further information co	oncerning this matter, pleas	e call:			
MA SOCORRO AGUA	YO	at (3087048		
Name of C	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for th	e 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)		
Amend Divisio P.O. Bo	ment Section n of Corporations ox 6327 ssee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to

10
Articles of Incorporation
of

Coquin's Geaning 3	service Corp
(Name of Corporation as currently	y filed with the Florida Dept. of State)
(Document Number of	Corporation (if known)
(Document Number of	Corporation (II known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coward "Corp," "Inc," or "Coward" or the abbreviation ""	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	· · · · · · · · · · · · · · · · · · ·
	TA 92 18
C. Enter new mailing address, if applicable:	52
(Mailing address MAY BE A POST OFFICE BOX)	
	Sec. 9. 12
	F.C.
	R 2
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ress in Florida, enter the name of the
new registered agent and/or the new registered office address:	<u>i</u>
Name of New Registered Agent	
(Florida stre	eet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	•
l hereby accept the appointment as registered agent. I am familiar w	eith and accept the obligations of the position.
Signature of New R.	egistered Agent, if changing
=-8	10

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:	ive, ana sai	ny Sinna, Sv as an Ada.	
X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u> MA SOCORRO AGUAYO	Address 140 RAINDON DR NW S.A 1516 LUKE AVE
1) X Change	<u> </u>	MA SOCORRO AGUATO	
Add			S. A DESTIN, FLORIDA-32541-
Remove			Fort WAlton Beach 32548
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).	(Be specific)
,	
	•
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 do	nys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	officient for approval
by(voting group)	
☐ The amendment(s) was/were adopted by the board of directors wit action was not required.	hout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
Signature 10. Socoro Aguay	
(By a director, president or other efficer selected, by an incorporator – if in the ha appointed fiduciary by that fiduciary)	
Ma Soci	orro AGUAYO e of person signing)
(Typed or printed nam	e of person signing)
	P
(Title of p	erson signing)