J49737

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DEC 1.2 2019
LALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Commercial Clean	ing Service of Lee County				
	BER:					
The enclosed Articles	s of Amendment and fee are su	ebmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	Barbara DeSousa					
		Name of Contact Person	n			
	Commercial Cleaning Service of Lee County					
		Firm/ Company				
	3444 Marinatown Lane NW	, ,				
		Address	 			
	North Fort Myers, Florida 3:	3903				
	•••	City/ State and Zip Cod	e			
puck	2023@aol.com					
·	=	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
Manuel DeSousa		at (997-9113			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

J49737 (Document Number of Corporation (if known)	Dept. of State)
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporati</i> its Articles of Incorporation:	ion adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "in "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional coword "chartered," "professional association," or the abbreviation "P.A."	corporated" or the abbreviation
B. Enter new principal office address, if applicable:	6-3
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
7—712—1134—1134————————————————————————————	
	
C. Enter new mailing address, if applicable:	- 1
(Mailing address MAY BE A POST OFFICE BOX)	
	<u></u>

D. If amending the registered agent and/or registered office address in Florida, enter the new registered agent and/or the new registered office address: Name of New Registered Agent	e name of the
new registered agent and/or the new registered office address:	e name of the
	e name of the
Name of New Registered Agent Name of New Registered Agent	e name of the

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 Doc			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) X Change	ST	Manuel DeSousa	931 SE 1st Place		
Add			Cape Coral, Florida 33990		
Remove			*-1-1 -1		
2) Change	P	Barbara DeSousa	931 SE 1st Place		
X Add			Cape Coral, Florida 33990		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add			<u></u>		
Remove					
6) Change					
Add					
Remove					

(Attach additional sheets, if necessary).	(Be specific)	(s) here:		
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If an amendment provides for an excl provisions for implementing the ame	hange, reclassificat	ion, or cancellation	on of issued shares,	
(if not applicable, indicate N/A)	nument it not con-	amed in the ame	nament risen.	
O Shares of common stock changed from	n Manual DeSousa t	o Barbara DeSous	a.	
<u> </u>	· · · · · ·			
				···

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wildocument's effective date on the Department of State's records.	l not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11/8/2019 Signature Banaa ADelansa	
Signature BANNIA & DeSonsa	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Barbara DeSousa	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

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