L60222

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OF DEC -5 PN 12: 30

SECRETARY OF STATE
AND ASSEEL FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Coni N	Mar Draperies, Inc.
DOCUMENT NUMBER: L60222	
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
Richard G. Pollina	
(N	ame of Contact Person)
Coni Mar Draperie	
	(Firm/ Company)
10861 Ragsdale S	
	(Address)
Bonita Springs, FL 3	4135
(C	ity/ State and Zip Code)
For further information concerning this ma	tter, please call:
Richard G. Pollina	at (239) 947-4882
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	ınt:
\$35 Filing Fee \$\text{Certificate of Status}\$	✓ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

05 DEC -5 PH 12: 30 Coni Mar Draperies, Inc. (Name of corporation as currently filed with the Florida Dept. of State) OF STATE TALLAHASSEE, FLORIDA L60222 (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: **NEW CORPORATE NAME (if changing):** On-Site Drapery Cleaning and More, Inc. (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 11-30-05
Effective date if applicable: January 31, 2006 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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 cast 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.
Signature (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)
Richard G. Pollina
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Coni Mai	r Draperies, Inc.		
DOCUMENT N	UMBER: <u>L60222</u>		***************************************	
The enclosed Arti	cles of Amendment and fee a	are submitted for filing.		
Please return all c	orrespondence concerning th	is matter to the following:		
Rie	chard G. Pollina			
	(Name	of Contact Person)		
Co	oni Mar Draperies,	Inc.		
	(Fi	rm/ Company)		
<u>10</u>	861 Ragsdale Stre	et		
		(Address)		
Bo	nita Springs, FL 341	35		
	(City/S	tate and Zip Code)		
For further inform	ation concerning this matter,	please call:		
Richard G. Pollina		at (239) 947-4		
(Nam	e of Contact Person)	(Area Code & Daytime	e Telephone Number)	
Enclosed is a chec	k for the following amount:			
□\$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)	
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C	 ircle	