## M105 20

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SECRETARY OF STATE

## COVERACTTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Wright Carpet Clea	aning, Inc.	
DOCUMENT NUM			
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Marian Bannister	•	
	<del></del>	Name of Contact Person	n
	Wright Carpet Cleaning, Inc.		
		Firm/ Company	
	13611 S. Dixie Hwy., #109-5	• •	
		Address	······································
	Palmetto Bay, FL 33176		
		City/ State and Zip Cod	e
Wrie	ghtCarpetClng@hotmail.com		
		sed for future annual report	notification)
		ord for turning and and report	'
For further information	on concerning this matter, pleas	se call:	
Marian Bannister		at (305	253-1750
Name	of Contact Person	' Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	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)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio Clifton	Address  Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation of ·

Wright Carpet Cleaning, Inc.

( <u>Name o</u> M10920	f Corporation as curren	tly filed with the Florida Dept.	of State)
W110920	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation ado	pts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
Right Floor Care, Inc.			The Dew
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc," or	"Co". A professional corporati	ated" or the appreviation on name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		13550 SW 100 Ct.	SAN CO
		Miami, FL 33176	
			5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		13611 S. Dixie Hwy., #109-	515
		Palmetto Bay, FL 33176	
D. If amending the registered agent and	d/or registered office ad	drass in Florida, antar the name	of the
new registered agent and/or the new	registered office addre	ess:	of the
Name of New Registered Agent	Marian Bannister		
	13550 SW 100 Ct.		
	(Florida :	street address)	
New Registered Office Address:	Miami	, !	Florida
-		(City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			of the position.

Signature of New Registered 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	<i>⊉</i>
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change	·		· · · · · · · · · · · · · · · · · · ·
Add Remove		1/19	
2) Change	<del>- 111</del>		
Add			
Remove			
3) Change		· .	
Add			·
Remove		·	
4) Change	<del></del>	<del></del>	-
Add			
Remove			
5) Change	<del></del>	<u></u>	
Add			
Remove			<u></u>
6) Change		_	
Add			
Pemove			

E. <u>If amend</u> (Attach <i>ad</i>	ng or adding additional Articles, enter change(s) here:  litional sheets, if necessary). (Be specific)
	<del></del>
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	<u> </u>
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·	
	<del></del>
<u>provisio</u>	ndment provides for an exchange, reclassification, or cancellation of issued shares, as for implementing the amendment if not contained in the amendment itself: the applicable, indicate N/A)
	A/A

	May 24, 2016	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
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, tepartment of State's records.	his date 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 cast for the amend afficient for approval.	ment(s)
	proved by the shareholders through voting groups. The following streach voting group entitled to vote separately on the amendment(s)	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	· (voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shar	eholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and sharehold	der
May 24, 2 Dated	016	
	2 26 9	
Signature	lirector, president or other officer – if directors or officers have not	heen
	ed, by an incorporator – if in the hands of a receiver, trustee, or other	
	ated fiduciary by that fiduciary)	
· .	Marian Bannister	
	(Typed or printed name of person signing)	
	Secretary, Treasurer, Director	
•	(Title of person signing)	