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10/16/23--01036--004 **35.00



COVER LETTER

NAME OF CORPORATION: Dreyer's Cleaning and Restotation

DOCUMENT NUMBER: POQUOO 52404

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Manue | Raftos
Name of Contact Person

Dreyer's Cleaning and Restotation
Firm Company

44619 MM MS HMMY 441

Address

Alachua, FL 32615

City' State and Zip Code

Accounting Dreyer's DRT. Com

E-mail address/(to be used for fitture annual report notification)

For further information concerning this matter, please call:

Manual Rathos
Name of Contact Person

Area Code & Daytime Telephone Number

S35 Filing Fee

S43.75 Filing Fee & Certificate of Status

Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee & Certified Copy

(Additional copy is enclosed)

☐S52.50 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 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)

(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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

(Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

 \square 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)

Example:

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 Doc, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	5	Marrel Ramos	1561 NW 29th rd. APT 6 Gaines Ville, Ft 32605
X Add			Gainesville, Ft 32605
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		 -	
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
11/14	
10/14	
	
	
f an amendment provides for an 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)	
(i) not approxime, material)	
1 / L	

.

	if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (no more than 90 days afte	· amendment file date)
Note: If the date inserted in this block does not meet the applicable statut document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of di action was not required.	rectors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	f votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through votin must be separately provided for each voting group entitled to vote separ	g groups. The following statement stely on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient	it for approval
by(voting group)	<u>.</u>
(voting group)	
Dated /0 /10 /2 3 Signature	
(By a director, president or other/officer - if directed, by an incorporator - if in the hands of appointed fiduciary by that fiduciary)	
Tonu Han D. (Typed or printed name of po	resp signing)
Praside man	
(Title of person signing)	