## PD1000085571

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(Ad	dress)	_
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(Cit	ty/State/Zip/Phone	: #)
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Special Instructions to	Filing Officer:	
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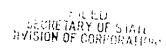
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Tropical CleanAir,	, Inc.	
DOCUMENT NUMB	ER: P01000085571		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	condence concerning this mat	tter to the following:	
	RuthHaigh		
-	-	Name of Contact Person	1
	TropicalCleanAir, Inc.		
•		Firm/ Company	
	409 ThumperThoroughfare		
_		Address	
	Key Largo, Fl. 33037		
		City/ State and Zip Cod	e
tropic	alcleanair4u@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Ruth Haigh		305	394-2783
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)
Ame Divis P.O.	ing Address Indment Section Ision of Corporations Box 6327 Ishassee, FL 32314	Ameno Divisio Cliftor	Address  Iment Section  Important on of Corporations  Important of Building  Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



2016 SEP -6 PM 12: 49

(Name of Corporation	as currently filed with the Florida Dept. of State)
P0100008557TropicalCleanAir, Inc.	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
	The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable:	POG.
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I as	tered Agent: am familiar with and accept the obligations of the position.
Signatu	ure 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	<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	VP	JeremyHaigh	409ThumperThoroughfare
X Add	· · · · · · · · · · · · · · · · · · ·		Key Largo, Fl. 33037
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Anach adamona sneets, if necessar)	rticles, enter change(s) ). (Be specific)		
ddingJeremyHaighasVP with 40%:	haresRuthHaighto ha	ve60%	
			·
			<del>-</del>
	<u></u>		
If an amendment provides for an e	change, reclassificatio	n, or cancellation of is	sued shares.
provisions for implementing the a (if not applicable, indicate N/A	mendment if not contai	ned in the amendmen	t itself:
dding JeremyHaighasVP with 40%		ve60%	
. <u></u>			
			· ·

	. 08/16/2016		
The date of each amendment			if other than th
date this document was signed		n it.l Sclint IARY	LU   OF 51&D
Effective date if applicable:	'	HYISION OF CO	ห้ายให้สำคั
Effective date it applicable.	(no more than 90 days after amendment file date)	2016 SEP -6	PM 12: 1.9
	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will no	it be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
	re adopted by the shareholders. The number of votes cast for the amen ere sufficient for approval.	dment(s)	
	re approved by the shareholders through voting groups. The following ed for each voting group entitled to vote separately on the amendment		
"The number of vote:	s cast for the amendment(s) was/were sufficient for approval		
by	(voting group)		
	(voting group)		
action was not required.  The amendment(s) was/we	re adopted by the board of directors without shareholder action and share adopted by the incorporators without shareholder action and shareholder		
action was not required.			
08/10 Dated	6/2016		
Signature	Ruth Age		
(1	By a director, president or other officer – if directors or officers have no		
	elected, by an incorporator – if in the hands of a receiver, trustee, or oth ppointed fiduciary by that fiduciary)	ner court	
	Ruth Haigh		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		<del></del>