## P020000 63582

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Amend

JUL 18 2019 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: GLORIA'S CLE	EANING SERVICES OF ORLANDO, INC
DOCUMENT NUMBER: P02000063582	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Piedad I. Harris	
<del></del>	Name of Contact Person
GLORIA'S CLEANING S	ERVICES OF ORLANDO, INC
	Firm/ Company
14524 LAKE UNDERHII	
	Address
ORLANDO, FL 32828	
	City/ State and Zip Code
GLORIASCLEAN22@BELLSC	DUTH.NET
	used for future annual report notification)
,	,
For further information concerning this matter, pl	ease call:
PIEDAD I HARRIS	at (321 ) 299-5220
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
\$35 Filing Fee Securificate of Status	•
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

GLORIA'S CLEANING SERVICES OF ORLANDO. IN	c:	ORIASC	LEANING	SERVICES (	OFORLA	NDO	INC
---	----	--------	---------	------------	--------	-----	-----

(Name of Corporation as currently	filed with the Florida Dept. of State)	
2000063582		
(Document Number of	Corporation (if known)	
suant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> Articles of Incorporation:	Iorida Profit Corporation adopts the following amend	dment(
If amending name, enter the new name of the corporation:		
	The v	new
ne must be distinguishable and contain the word "corporation, orp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cod "chartered." "professional association," or the abbreviation "I	20". A professional corporation name must contain	
Enter new principal office address, if applicable: incipal office address <u>MUST BE A STREET ADDRESS</u> )		_
	2	_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2019 :	
,	;	<u>.</u> .
		_
If amonding the registered agent and/or registered office address	ess in Florida, enter the name of the	
If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	SS III Florida; enter the hame of the	
Name of New Designary & Name	_	
Name of New Registered Agent		
(Florida stree	er address)	
(Florida streen New Registered Office Address:		_

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offic 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 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 Do	<u>)e</u>	
X Remove	$\underline{v}$	Mike Jo	ones	
_X Add	<u>sv</u>	Sally Su	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		GLORIA AVENDANO	16703 CEDAR CREST DR
X Add				ORLANDO, FL 32828
Remove				
2) Change				
Add				<del></del>
Remove				
3 ) Change	<del></del>	<del>-</del>		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
Kemove				<del></del>
6) Change		<del></del>		
Add				
Remove				

(Atta	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
_	
. <u>If a</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)

The date of each amendment(s) adoption date this document was signed.	n:	, if other than th
•	-2019	
Effective date in applicable.	- 2019 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date vent of State's records.	vill not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement 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)	
	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder	
Dated July 3	2-2019 11+->	
Signature 2000	11+->	
(By a director,	, president or other officer – if directors or officers have not been	
•	n incorporator – if in the hands of a receiver, trustee, or other court	
appointed fidu	uciary by that fiduciary)	
PIEDA	AD I HARRIS	
<del></del>	(Typed or printed name of person signing)	
PRESI	IDENT	
<del></del>	(Title of person signing)	

. . . .