P02600090618

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AFORETARY OF STATE

ATTAMASSEE, FLORIDA

ATT

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CACHE CLENER	S, INC.		
DOCUMENT NUME				
	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	JULIAN BULSARA			
		Name of Contact Person		
	CACHE CLEANERS, INC.			
	Firm/ Company			
	2455 2457 NW. 40TH AVE	MIE		
	Address			
	LAUDERHILL FL.33313			
		City/ State and Zip Code	;	
purnir	nabulsara@yahoo.com			
		sed for future annual report	notification)	
	,	•	,	
For further information	concerning this matter, pleas	se call:		
PURNIMA BULSAR.	A	95 4 at (554 4133 le & Daytime Telephone Number	
Name of Contact Person		Area Coo	le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)	
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

CACHE CLEANERS, INC.			
(Name	of Corporation as curren	tly filed with the Florida Dept. of	State)
P02000090618			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1.1006, Florida Statutes, thi	s Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
PRESTIGE DRY Cleaners, I	ne.		The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or	"Co". A professional corporation	d" or the abbreviation
B. Enter new principal office address.	if applicable:	2455 2457 NW 4OTH AVE	
	(Principal office address MUST BE A STREET ADDRESS)		5000
		FL. 33313	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SAME AS ABOVE	26 AH
			9: 43
D. If amending the registered agent an new registered agent and/or the ne			the
Name of New Registered Agent	JULIAN BULSARA		
	2455 2457 NW 40TH A	VENUE	
	(Florida s	treet address)	
New Registered Office Address:	LAUDERHILL	, Flo	33313
	·····	(City)	(Zip Code)
New Registered Agent's Signature, if call the state of the Agent's Registered Agent's Signature, if call the state of the Agent's Signature, if call the state of the Agent's Signature, if call the state of the sta			he position.
* (Wian Bulun	Registered Agent, if changing	
(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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	
Add			
Remove			
4) Change			
Add			,
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding add	litional Articles, enter change(s) l	<u>here</u> :	
(Attach additional sheets, if	necessary). (Be specific)		
			
			
			
NA/			
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			-
If an amendment provides	for an exchange, reclassification,	or concellation of issued share	,
provisions for implement	ng the amendment if not contain	ed in the amendment itself:	<u>51</u>
(if not applicable, indi	cate N/A)	ed in the amendment haen.	
	,		
N/A			
			
	, X		
	6		
	<u> </u>		
···		-	

The date of each amendment(s)	adoption:	, if other than th
date this document was signed.	OV.1,2015	
Effective date <u>if applicable</u> :	JV.1,2015	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendm sufficient for approval.	ent(s)
	pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	>>	
<u> </u>	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareh	nolder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholde	r
10/20/20 Dated	15	
Signature 🔀	Julian Bulown	
selec	director, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	
	JULAIN BULSARA	
	(Typed or printed name of person signing)	
	TREASURER	
	(Title of person signing)	