

P03000043669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Professional Window Cleaning Services of Central Florida, Inc

DOCUMENT NUMBER: P03000043669

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

Please return all correspondence concerning this matter to the following:

**Wilfredo Zelaya**

Name of Contact Person

**Professional Window Cleaning Services of Central Florida, Inc**

Firm/ Company

**953 Wages**

Address

**Orlando, Florida 32825**

City/ State and Zip Code

**wzelaya1@att.net**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Wilfredo Zelaya**

at ( **407** ) **648-7400**

Name of Contact Person

Area Code & Daytime Telephone Number

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

\$35 Filing Fee

\$43.75 Filing Fee &  
Certificate of Status

enclosed)

\$43.75 Filing Fee &  
Certified Copy

(Additional copy is

(Additional Copy

\$52.50 Filing Fee  
Certificate of Status

Certified 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

Professional Window Cleaning Services of Central Florida, Inc  
953 Wages Way  
Orlando, Florida 32825  
T. 407 277-6689 F. 407 277-5522

January 10, 2012

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

To Whom It May Concern:

Regarding the above my corporation, I am requesting an amendment change of name  
to: C&M BUILDING SERVICES, INC.

Please find enclosed check for \$35.00 to cover the expenses for the name change.

Thank You  
Sincerely,



Wilfredo Zelaya  
President

Articles of Amendment  
to  
Articles of Incorporation  
of

**Professional Window Cleaning Services of Central Florida, Inc**

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

**P03000043 669**

(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:**

**C&M Building Services, Inc.**

*The new 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**)

**953 Wages Way**  
**Orlando, Florida 32825**

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

**953 Wages Way**  
**Orlando, Florida 32825**

**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 Office Address:* \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**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*

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TALLAHASSEE FLORIDA

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**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:

|  |           |                    |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input type="checkbox"/> Remove            | <u>V</u>  | <u>Mike Jones</u>  |
| <input type="checkbox"/> Add               | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One)  | <u>Title</u> | <u>Name</u>            | <u>Address</u>  |
|---|--------------|------------------------|---|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>P</u>     | <u>Wilfredo Zelaya</u> | <u>953 Wages Way</u><br><u>Orlando, Florida 32825</u> |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | _____        | _____                  | _____   |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | _____        | _____                  | _____   |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | _____        | _____                  | _____   |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | _____        | _____                  | _____   |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | _____        | _____                  | _____   |

The date of each amendment(s) adoption: \_\_\_\_\_

Effective date if applicable: **January 10, 2012**

(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each 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)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated **January 10, 2012**

Signature  \_\_\_\_\_

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

**Wilfredo Zelaya**

(Typed or printed name of person signing)

**President**

(Title of person signing)