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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: THE UNIFORM C	GROUP INC	
	BER: P03000062686		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	•
	LISETTE LIFSCHITZ, CPA		
		Name of Contact Person	n
	L&L ACCOUNTING SERV	ICES PA	
		Firm/ Company	· · ·
	3625 N COUNTRY CLUB I	OR APT 1003	
		Address	-
	MIAMI FL 33180		•
		City/ State and Zip Cod	e
LISE	TTE.LIF@GMAIL.COM		
		sed for future annual report	notification)
	,	·	.′
For further informatic	on concerning this matter, pleas	se call:	
BIBIANA GARBER		786	290 8339
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE UNIFORM GROUP INC

/Numa	of Corporation as aureantle	Glad with the Claride Dant of	F State)	
P03000062686	or Corporation as currently	filed with the Florida Dept. o	<u>State</u>)	
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this Fl	'orida Profit Corporation adop	ts the following	am
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	o". A professional corporatio	ed" or the abl	The brev ontc
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>			TALL AH SS of the special states and special states are special states and special states are special states and special states are special states	20 19 SEP 20
D. If amending the registered agent an new registered agent and/or the ne		ss in Florida, enter the name o	if the	- F
Name of New Registered Agent	L&L ACCOUNTING SERV	ICES PA	-	5: 4(
Traine by the negistered rigent	3625 N COUNTRY CLUB I	OR APT 1003		
	(Florida stree	t address)		
New Registered Office Address:	AVENTURA	· FI	orida 33180	
	((lity)	(Zip Ce	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regis	tered agent. I am familiar wit		`the position.	
	Signature of New Reg	istered Agent, if changing		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and t 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 Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, P 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>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	BIBIANA B GARBER	1825 NE 77TH AVE
Add			PEMBROKE PINES FL 3302-
Remove			
2) Change			
Add			
Remove			·
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Ο Ct			
6) Change			
Add			
Remove			

	(Be specific)			
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The date of each amendment(s date this document was signed.	adoption:
Effective date if applicable:	
	(no more than 90) days after amendment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	, ^{,,}
	(voting group)
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
09/18/19	
Dated	Janes Za
Signature	
(By	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court printed fiduciary by that fiduciary)
	BIBIANA B GARBER
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)