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ZOIR AUG -6 PM 1: 30 SECRETARY OF STATE

C. GOLDEN AUG - 8 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: INSIDE OU	JT WINDOW WASHING, INC	
DOCUMENT NUMBER: P03000081369		
The enclosed Articles of Amendment and fee	e are submitted for filing.	
Please return all correspondence concerning t	this matter to the following:	
LEAH MCCRUM		
·	Name of Contact Perso	n
NEW JAX CITY INS	URANCE INC	
	Firm/ Company	
PO BOX 50276	, ,	
	Address	
JACKSONVILLE BE	ACH, FL 32240	
	City/ State and Zip Cod	e
. INFO@JAXCITY.NET		
	to be used for future annual report	notification)
For further information concerning this matte	r, please call:	
JAMES MIZELLE	at ((904)	
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 F Certificate of St		□\$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	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

INSIDE OUT WINDOW WASHING, INC.

2018 AUG -6 PM 1: 30

HING, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) RETARY OF STATE TALLAHASSEE, FL P03000081369 (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 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

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.

X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
<u>X</u> Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	CO	OLIVER, ETHRIDGE JOELSON	2109 THE WOODS DR
Add			JACKSONVILLE, FL 32246
X Remove			
2) Change	<u>co</u>	BOUCHARD, RAYMOND	2109 THE WOODS DR
Add			JACKSONVILLE, FL 32246
X Remove			
. 3) Change	OFFICE	BEARDEN, DEVON L	2109 THE WOODS DR
Add			JACKSONVILLE, FL 32246
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach <i>additional</i>	sheets, if necessary). (Be specific)
•	
	<u> </u>

<u>lf an amendmen</u>	provides for an exchange, reclassification, or cancellation of issued shares,
provisions for it	nplementing the amendment if not contained in the amendment itself:
(if not appli	cable, indicate N/A)
	

The date of each amendmants	07/22/2018 (s) adoption:, if other
date this document was signed.	s) adoption:, if other
	07/22/2018
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this date will not be liste e Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
☐ The amendment(s) was/were must be separately provided	e approved by the shareholders through voting groups. The following statement d 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)
	(voting group)
	(voting group) e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	
☐ The amendment(s) was/were action was not required. ☐ The amendment(s) was/were	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder
☐ The amendment(s) was/were action was not required. ☐ The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder
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