## PB0000131524

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	<del>(</del> *)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	e)
(Do	ocument Number)	
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FILED PRESSENTATIONS

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OCT 3 1 2017

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: ROLIM CLEANIN	NG INC	
DOCUMENT NUMBER			
The enclosed Articles of A		ibmitted for filing.	
Please return all correspon	ndence concerning this ma	atter to the following:	
LA	URACY ROLIM		
	•	Name of Contact Person	1
RO	LIM CLEANING INC		
		Firm/ Company	
148	894 TOSCANA WAY		
		Address	
NA	PLES FL 34120		
		City/ State and Zip Code	2
For further information co		sed for future annual report	notification)
LAURACY ROLIM	. <u></u>	at (	)
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	e following amount made	payable to the Florida Depa	rtment 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)
Amendr Division P.O. Bo	Address nent Section tof Corporations x 6327 see, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

to

ROLIM CLEANING INC	
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P03000	131 52A
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
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 ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida ,	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia	nt: r 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addręs</u> s
1) Change	<u>S</u>	MAURA SANTIAGO	4540 CORAL PALMS LN APT 4
X Add			NAPLES FL 34116
Remove			
2) Change			<del></del>
Add			
Remove			
3) Change			
Add			<del>- ,, -,</del> -, -, -, -, -, -, -, -, -, -, -, -, -,
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	·····
	<del></del>
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
·	

	10/24/17	
The date of each amendment(s date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	0/24/17	
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	s block does not meet the applicable statutory filing requirements, this of Department of State's records.	date will not be listed as the
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 amendmen sufficient for approval.	u(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
10/24/11 Dated	7	
(By sele	Laurence Policies and directors or officers have not been cited, by an incorporator – if in the hands of a receiver, trustee, or other commend fiduciary by that fiduciary)	n urt
	LAURACY ROLIM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>