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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ROTONDA WINE	OOW CLEANING INC			
DOCUMENT NUM	BER: P03000139132				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	RENE CARRILLO				
Name of Contact Person RCE CLEANERS INC			1		
	Firm/ Company				
	403 E DEARBORN ST				
		Address	,		
	ENGLEWOOD, FL 34223				
		City/ State and Zip Code	e		
MUI	.TISERVICIOSLATINOAME	ERICA@YAHOO.COM			
 -	E-mail address: (to be us	sed for future annual report	notification)		
For further information	in concerning this matter, pleas	se call:			
SHAMAINE SALCEDO		941 at (625-3300		
Name	Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)		
Am Div P.C	iling Address endment Section dision of Corporations Box 6327 lahassee, FL 32314	Amend Division Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

ROTONDA WINDOW CLEANING INC

(Name c	f Corporation as currentl	v filed with the Florida Dept. of State)		
P03000139132				
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new na	me of the corporation:			
		The new		
	ation "Corp," "Inc," or "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the 'P.A."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		403 E DEARBORN ST		
		ENGLEWOOD, FL 34223-3408		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		403 E DEARBORN ST		
		ENGLEWOOD, FL 34223-3408		
D. If amending the registered agent an new registered agent and/or the new				
Name of New Registered Agent RENE CARRILLO		-		
	403 E DEARBORN ST			
	(Florida str	vet address)		
New Registered Office Address:	ENGLEWOOD	, Florida 34223-3408		
 		(City) (Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist		: with and accept the obligations of the position.		
	Signafile of New 1	Kegistered 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.

 $P = President; V = Vice President; T = Treasurer; S \neq Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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: XChange	<u>PT</u>	<u>John Doe</u>			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	D	JAMES JENNINGS SR	6159 ROWE ST		
Add		-	ENGLEWOOD, FL 34224		
X Remove					
2) Change	P	RENE CARRILLO	403 E DEARBORN ST		
$\frac{X}{X}$ Add			ENGLEWOOD, FL 34223-3408		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		<u></u>			
Add					
Ramova					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)				
			•		
			<u> </u>		
			+		
					
			,		
<u> </u>	<u> </u>			_	
f an amendment provides for an excl provisions for implementing the ame	nange, reclassifica endment if not con	tion, or cancellat tained in the amo	ion of issued sh endment itself:	ares,	
(if not applicable, indicate N/A)					
			 		
			•		
				-	
				<u>-</u>	

	07/01/2018	
The date of each amendment(s) a	doption:	, if other than th
date this document was signed.	21/221/	
Effective date if applicable:	01/2018	
<u></u> ,	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
07/01/201 Dated	8	
Signature 4	mus Jem 1	
(By a c	lirector, president or other officer) – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)	_
	JAMES JENNINGS SR	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	