...POHO00027567

(Re	questor's Name)	
(Ad	dress)	
	1.	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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SECRETARY OF STATE OF STATE OF STATE OF TORPORT TOWN

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	ON: CARMEN	CLEANING CORF	PORATION
DOCUMENT NUMBER:	P04000027567	7	
The enclosed Articles of An	nendment and fee a	re submitted for filing.	
Please return all correspond	ence concerning th	is matter to the followin	g:
		A WOMBLE	
	(Name	of Contact Person)	
C	ARMEN CLEA	NING CORPORA	ATION
	(Fi	rm/ Company)	
20	686 FOUNTIAI	N VIEW CIRCLE U	JNIT 108
·		(Address)	
		ES FL 34109 tate and Zip Code)	
For further information cond	, ,	•	
NORMA WOM		//	96-2043
(Name of Contac	t Person)	(Area Code &	Daytime Telephone Number)
Enclosed is a check for the f	following amount:		
	.75 Filing Fee & tificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing Address Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	ions	Street Address Amendment Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	rations enter Circle

Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE DIVISION OF CORPORATIONS

06 APR | | AMII: 58

CARMEN CLEANING CORPORATION

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

	P04000027567
-	(Document number of corporation (if known)
	ions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> mendment(s) to its Articles of Incorporation:
NEW CORPORATE	NAME (if changing):
	prporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") in must contain the word "chartered", "professional association," or the abbreviation "P.A.")
	OPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) being amended, added or deleted: (BE SPECIFIC)
PLEASE ADD A	ARSENIO GONZALEZ AS A VICEPRESIDENT OF
CARMEN CLEA	NING CORPORATION HIS ADDRESS IS THE
FOLLOWING:	2686 FOUNTIAN VIEW CIRCLE UNIT 108
	NAPLES, FL 34109
	(Attach additional pages if necessary)
	des for exchange, reclassification, or cancellation of issued shares, provision mendment if not contained in the amendment itself: (if not applicable, indicate N

(continued)

The date of each amendment(s) adoption: 03/15/06	
Effective date if applicable: 03/15/06	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	or
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	у
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	or
☐ The amendment(s) was/were adopted by the incorporators without shareholder action a shareholder action was not required.	nc
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)	
NORMA WOMBLE	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

FILING FEE: \$35