PU40000 80327

(Requestor's Name)
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(Business Entity Name)
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12-2-02





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GREASE LIGHT	NING DISPOSAL, INC.	
DOCUMENT NUMBER: P04000080327		
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
JULFRANCE OLCIMA		
	Name of Contact Person	
GREASE LIGHTNING DIS		
	Firm/ Company	
PO BOX 120553	. ,	
	Address	
FORT LAUDERDALE, FL	33312	ગ
	City/ State and Zip Code	2022 DEC
GREASELIGHTNING04@Y	'AHOO.COM	= }
E-mail address: (to be us	sed for future annual report notification)	Ċ
For further information concerning this matter, pleas	se call:	11 12· C
JULFRANCE OLCIMA	at (954) 274-7526 Area Code & Daytime Telephona Number	٢
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made p	payable to the Florida Department of State:	
■ \$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 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	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Articles of Amendment on

to
Articles of Incorporation
of

(Name of Corporation a	s currently filed with the Florida De	ot, of State)
204000080327		ni or state)
(Document	Number of Corporation (if known)	
fursuant to the provisions of section 607.1006, Florida Stas Articles of Incorporation:	nutes, this Florida Profit Corporation a	dopts the following amendment(s
. If amending name, enter the new name of the corpo	ration:	
ame must be distinguishable and contain the word "corpor Inc.," or Co.," or the designation "Corp," "Inc," or chartered," "professional association," or the abbreviati	"Co" A professional cornoration i	The new or the abbreviation "Corp.," name must contain the word
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u>		
		————»
		022
Enter now mailing address if and the		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2
		0 1
		
		~~~~~
If amending the registered agent and/or registered o	ffice address in Florida, enter the na	∾ me of the
new registered agent and/or the new registered office	address:	ne of the
Name of New Registered Agent		
(1	florida street address)	<del></del>
New Registered Office Address:		, Florida
	(City)	(Zip Code)
w Degistered Appeth Structure 18 1 1 2 2		
w Registered Agent's Signature, if changing Registere ereby accept the appointment as registered agent. I am	d Agent: amiliar with and accept the obligation	e of the position
g	will and decept the obligation,	s of the position.
		<u> </u>
Signature of	of New Registered Agent, if changing	<u></u>

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	MGR	MICHELET PETIT	282 NW 111 TERRACE
X Add			MIAMI SHORES, FL 33168 MP
Remove			
2) Change		<del>_</del>	20
Add			2022 D
Remove 3) Change			
Add			
Remove			
4) Change		<del>-</del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	<u> </u>		
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
provisions for implementing the amendment if not contained in the amendment itself.			
(if not applicable, indicate N/A)		20	
	-	2022 [	
		<del>- E</del>	
		í	
		—- <del>∵</del>	
		<u>-P</u>	J
	-	2	( )
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		2	
	<del></del>		

	11/30/2022		
The date of each amendment(s) date this document was signed.	adoption:		, if other than
Effective date if applicable:			
	(no more than 9	0 days after amendment file dat	te)
<b>Note:</b> If the date inserted in this document's effective date on the E	block does not meet the applic Department of State's records.	cable statutory filing requireme	ents, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ac action was not required.	dopted by the incorporators, or l	poard of directors without share	holder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The sufficient for approval.	number of votes cast for the a	mendment(s)
☐ The amendment(s) was/were armust be separately provided fo	oproved by the shareholders throw reach voting group entitled to	ough voting groups. The follow vote separately on the amendme	ring statement ent(s):
"The number of votes cas	t for the amendment(s) was/we	re sufficient for approval	
by	(voting group)	·	
	(voting group)		
Dated	11/30/2022		
C'	DocuSiq	•	
(By a c	lirector, president or othercoffic	expectative core of ficers have a hands of a receiver, trustee, or	e not been other court
	JULFRANCE OLCIMA		20
	(Typed or printed r	name of person signing)	
	DIRECTOR / PRESIDENT		EC -
	(Title of person sig	ning)	- <del>D</del> 11]
			FH 12: 22

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