P04000156291

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: DANIEL CLE	EANING SERVICE	CORPORATION
	R: P0400015629		
The enclosed Articles of	Amendment and fee are sul	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
[OC ACCOUNTIN	Name of Contact Person G SERVICES P.	
_		Firm/ Company	
2	24156 STATE RE	• •	
		Address	
L	LUTZ FL 33559		
-		City/ State and Zip Code	•
DCE	RUZ@DCACCOL	INTINGPA COM	1
<u> </u>		ed for future annual report	
		•	,
For further information	concerning this matter, pleas	e call:	
DAVID CRUZ		at (813	, 345-8503
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)
Amer Divis P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DANIEL CLEANING SERVICE CORPORATION

(Name of Corporation as currently f	iled with the Florida Dept. of State)	
P04000156291		
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corporation ad	opts the following amendment(s) to
A. If amending name, enter the new name of the co		
Daniel fainting & Cle	aning Services Co	ORPORATIONShe new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	rd "corporation," "company," or "incorpo o," "Inc," or "Co". A professional corpora	rated" or the abbreviation
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADD</u>	DRESS)	
C. Enter new mailing address, if applicable:	240	
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
		<u> </u>
		e•
D. If amending the registered agent and/or registered new registered agent and/or the new registered		ne of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida_	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Relatives accept the appointment as registered agent.	I am familiar with and accept the obligation	s of the position.
Signature of N	lew 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: <u>X</u> 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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	LUIS HERNANDEZ	2131 W PARIS STREET TAMPA FL 33604
X Remove 2) Change Add Remove	Ţ	ALEXIS PEREZ	3414 W LOUISIANA AVE TAMPA FL 33614
3) Change Add Remove	<u>T</u>	JOHNATAN BUENO	10433 MADISON GREEN DR TAMPA FL 33647
4) Change Add Remove	Ť	FRANCISCO BORJAS	12529 TIN FLY CR #104 TAMPA FL 33612
5) Change Add Remove	T	S ERGIO GONZALEZ	7514 N CLARK AVE TAMPA FL 33614
6) Change Add Remove	- 12		

(a <i>t</i>	amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)
_	
_	
_	
If p	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)
_	
_	
	·

The date of each amendment(s) adoption: 6-18-12
Effective date <u>if applicable</u> :
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ 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" (voting group)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 06/18/2012
Signature Auli Llan
(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)
JULIO LLANES
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)