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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF (CORPORATION: _	All American	Carpet and Upholstery Cle	eaning, Inc.
DOCUMEN	T NUMBER: P040	00159333		
The enclosed	Articles of Amendn	uent and fee are	submitted for filing.	
Please return	all correspondence of	oncerning this	matter to the following:	
	Jeffrey N. Grant			
		(Name of	Contact Person)	
		(Firm	/ Company)	
	1285 Smoke Rise	Lane		
		(2	Address)	
	Tallahassee	FL	32317	
		(City/ Stat	te and Zip Code)	
For further in	formation concernin	g this matter, p	lease call:	
Jeffrey N. Gr	ant		at (_850) 878-64	469
(Name of Contact Person)		(Area Code & Daytin	ne Telephone Number)	
Enclosed is a	check for the follow	ing amount:		
☑\$35 Filing Fe	ee ☐\$43.75 Fili Certificate		☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 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 Clifton Building 2661 Executive Center C		

Tallahassee, FL 32301

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Articles of Amendment	- .		
to .	=:3	2006	
Articles of Incorporation		8	
of	AHASSE	Ħ	-1
All-American Carpet and Upholstery Cleaning, Inc.	SŠÉ	<u> </u>	
(Name of corporation as currently filed with the Florida Dept. of State)	E, FLO	PM 3:	
P04000159333	S S	02	
(Document number of corporation (if known)	ি		

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing): Bone Dry Restoration and Cleaning, Inc. (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) (Attach additional pages if necessary) If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: 07/01/2006	
TO BE A STATE OF THE STATE OF T	
(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.	
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)	
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.	
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)	
Jettray Noel Grant	
(Typed or printed name of person signing)	
Jeffrey N. Grant	. .
(Title of person signing)	

FILING FEE: \$35