(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: EASY JAMMIN O	CLEANING & HANDYMA	AN SERVICES INC.
DOCUMENT NUMB	PO5000030518		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	RACQUEL MCKENZIE		
•	Name of Contact Person		
	N/A		
		Firm/ Company	
	8740 AZALEA CT, APT 10	2	
		Address	
	TAMARAC FL 33321		
		City/ State and Zip Cod	2
EASY	JAMMINCLEANING@GN	IAIL.COM	
	E-mail address; (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas ME	95.1	657-8002
Name of Contact Person		at ()
	the following amount made		
■ \$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)
Ame Divis P.O.	ing Address Indirection sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

EASY JAMMIN CLEANING & HANDYMAN SERVICES INC.

(Name of	Corporation as curren	atly filed with the Flori	da Dept. of State)	
P05000030518				
	(Document Number	of Corporation (if know	n)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, th	is Florida Profit Corpor	vation adopts the following	amendment(s) to
A. If amending name, enter the new nar	ne of the corporation:			
EASY JAMMIN CLEANING & MAINTI	ENANCE SERVICES II	NC.	- ;	The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or	"Co". A professional		
B. Enter new principal office address, if	annlicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)		N/A	1.0 A	. 18
		N/A	,	E T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	າດ ປຸກ ເຄື່	
		N/A	· 	
		N/A		** C)
D. If amending the registered agent and new registered agent and/or the new			the name of the	
<u> </u>	N/A	<u></u>		
Name of New Registered Agent				
-		street address)		
New Registered Office Address:	N/A		. Florida N/A	
New Registered Office Address.		(City)	Zip Co	ode)
New Registered Agent's Signature, if challength of the Agent's Agent as register			ligations of the position.	
	Signature of New	Registered Agent, if cha		

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) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
2) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
3) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
4) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
5) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A
6) N/A Change	N/A	N/A	N/A
N/A Add			N/A
N/A Remove			N/A

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A

F. If 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)
N/A
——————————————————————————————————————

· The date of each amendment(s) :	N/A adoption:	, if other than the
date this document was signed.		,
7/1 Effective date <u>if applicable</u> :	8/18	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, the epartment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the amendmufficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following star each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by N/A	,**	
•	(voting group)	
☐ The amendment(s) was/were accion was not required.	lopted by the board of directors without shareholder action and sharel	nolder
The amendment(s) was/were acaction was not required.	lopted by the incorporators without shareholder action and shareholde	: r
7/18/18 Dated Signature		
select	director, president or other officer – if directors of officers have not bed, by an incorporator – if in the hands of a receiver, trustee, or other need fiduciary by that fiduciary)	
	RACQUEL MCKENZIE	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	