

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone #	7)
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(Do	ocument Number)	······
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And

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R. WHITE

SECREPTARY OF SEVER

COVER LETTER

TO: Amendment Section

Division of Corpor	ations					
NAME OF CORPORA	L-2 Floor C	are, Inc,				
	_{ER:} P0500015203					
	f Amendment and fee are su					
•		_				
Please return all corresp	ondence concerning this ma	iter to the following:				
_	F	Ricardo Lizarrald	le			
		Name of Contact Person	1			
_	L-2	2 Floor Care, Inc	•			
	Firm/ Company					
_	310	01 41st Street S	<u>N</u>			
	. .	Address				
-	Na	aples, FL 34116				
		City/ State and Zip Cod	e e			
		or-care@hotma				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
			007.0440			
James L Vincent, EA		at (239	287-8443			
Name of	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)			
Mailing Address			Address			
	dment Section on of Corporations	Amendment Section Division of Corporations				
P.O. I	Box 6327	Clifton Building				
Tallal	nassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

FILED

Articles of Amendment to Articles of Incorporation

£-4	2 Floor Care, Inc.		
(Name of Corporation as current	tly filed with the Florida Dept. of	State)	_
	P05000152034		
(Document Number	er of Corporation (if known)		-
Pursuant to the provisions of section 607.1006, Flats Articles of Incorporation:	orida Statutes, this <i>Florida Profit C</i>	orporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the	he corporation:		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A profess	' or "incorporated" or the o	The new abbreviation contain the
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)			<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		- -
D. If amending the registered agent and/or reg new registered agent and/or the new register		enter the name of the	-
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	_
	(City)	(Z:p Code)	
New Registered Agent's Signature, if changing		ar de sous sa	
I hereby accept the appointment as registered age	ent. I am Jamiliar with and accept i	ne obligations of the position.	

Signature of New Registered Agent, fchanging

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, f 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 Doc	
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	VP	David Wade	3101 41st Street SW
X Add			Naples, FL 34116
Remove			
2) Change			
Add			
Remove			
3) Change	**************************************	-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:							
(Attac	h additional sheets,	f necessary).	(Be spec fic)				
		_					
			· · · · · · · · · · · · · · · · · · ·				
							
					 		
		 					
							
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. If an	amendment provid	les for an exch.	ange, reclassific	cation, or can	cellation of iss	ued shares.	
pro	visions for impleme	nting the amer	ndment if not c	ontained in th	e amendment	itself:	
	(f not applicable, in	dicate N.A)					
							· · · · · · · · · · · · · · · · · · ·
		ä					
		<u></u>					
							
							
		 					
		·					

The date of each amendment(s) ad	loption:U8/U1/2U13	, if other than the
date this document was signed.		
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 ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	1/2013 Wicardo	
(By a di selected	irector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	_
	Ricardo Lizarralde	
	(Typed or printed name of person signing)	-
	President	
	(Title of person signing)	