## DUDDO

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: PATTY?	s JANITORIAL	, INC.
DOCUMENT NUMBER: POLOC	00058659	
The enclosed Articles of Amendment and fee are subm		
Please return all correspondence concerning this matter	r to the following:	
PATRICIA (Name of C	T- CDX Contact Person)	
PATTY'S JAW!	Company)	
80 BRICKELL	BAY DR., Suite	1762
MIAMI, FL (City/ State	-, 3313 \ and Zip Code)	·
A DASME 2009 DE-mail address: (to be used		
For further information concerning this matter, please of		
PATRICIA T- COX (Name of Contact Person)	at ( 954 628 (Area Code & Daytime	2380 e Telephone Number)
Enclosed is a check for the following amount made pay		
\$35 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 Amendment Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314	Street Address Amendment Section Division of Conporation Clifton Building 2661 Executive Center 6 Tallahassee, FL 32301	



December 22, 2009.

PATRICIA T. COX PATTY'S JANITORIAL, INC. 801 BRICKELL BAY DR., SUITE 1762 MIAMI, FL 33131

SUBJECT: PATTY'S JANITORIAL INC

Ref. Number: P06000058659

We have received your document for PATTY'S JANITORIAL INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter,! within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 1009A00038805

IN 20 NH 8: 60

See Attached corrected
Apticles OF Ameroment
FOR "FOR PROFIT"CORPORAtion
Thank you

## Articles of Amendment

## Articles of Incorporation of

Patty !	JAN ITORIA	I INC.	
(Name of Corporation as cu	rrently filed with the Florida		
P	06000058659		
(Document N	lumber of Corporation (if know	vn)	
Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation		orida Profit Corporation ado	ots the following
A. If amending name, enter the new name	of the corporation:		
			_The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc,	" or "Co". A professional co	d" or the orporation
B. Enter new principal office address, if a (Principal office address MUST BE A STR.)			-
·			- FS
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF	ole: FICE BOX		10年
			SSEE P
D. If amending the registered agent and/o new registered agent and/or the new re-		Florida, enter the name of t	10 JAN 20 PH 12: 23
Name of New Registered Agent:			<b>.</b>
New Registered Office Address:	(Florida street ac	idress)	
	(City)	, Florida	<del></del>
New Registered Agent's Signature, if chan I hereby accept the appointment as registered.	n <mark>ging Registered Agent:</mark> d agent. I am familiar with a	nd accept the obligations of the	position.
	Signature of New 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)

	Name	Address	V 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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		MIAMI, FL 33	<b>T3</b> )
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. <u>If an ame</u> r	ndment provides for an exchange, rec	lassification, or cancellation of i	sued shares.
provisions	s for implementing the amendment if	not contained in the amendment	itseif;
(if not	applicable indicate N/A		
(if not	applicable, indicate N/A)		
(if not	applicable, indicate N/A)		
(if not	applicable, indicate N/A)		
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(if not	applicable, indicate N/A)		
(if not	applicable, indicate N/A)		
(if not	applicable, indicate N/A)		

The date of each amendment's	adoption: December 1, 2009
	(date of adoption is required)
Effective date if applicable:	
(	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
The amendment(s) was/were must be separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes can	st for the amendment(s) was/were sufficient for approval
by	27
(v	oting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	Polynous & Kax
Signature	Palmora & Cax
selecte	lirector, 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)
	PATRICIA TO COX
-	(Typed or printed name of person signing)
	President
-	(Title of person signing)