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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	CLARK ELEVATORS	SERVICE CO.	12 /2 · · · · · ·
	0101341		
The enclosed Articles of Amendm	ent and fee are submitt	ed for filing.	
Please return all correspondence c	oncerning this matter to	the following:	
MARIA CI	.ARK		
	N	ame of Contact Person	
CLARK EI	LEVATORS SERVICE	CO.	
	<u> </u>	Firm/ Company	
4771 SW 2	TERRACE		
•		Address	
CORAL G	ABLES, FL 33134		
	C	ty/ State and Zip Code	
CLARKRKM@G	imail.com		
-		or future annual report r	notification)
For further information concerning	g this matter, please cal	ł: 786	3859302
		at () 3859302
Name of Contact F	erson	Area Cod	e & Daytime Telephone Number
Enclosed is a check for the follow	ing amount made payab	ole to the Florida Depar	rtment of State:
	ficate 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 Addre Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Division Clifton 2661 Ex	Address nent Section n of Corporations Building secutive Center Circle ssec, FL 32301

Articles of Amendment to Articles of Incorporation of

CI	ARK	FIF	V۵	TORS	SER	VICE	CO

(Name of Corporation as currently	filed with the Florida Dept. of State)
06000101341	
(Document Number of	Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C ord "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	Management of the second of th
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office address	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida

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 <math>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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally St	nith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	<u>v</u>		RICHARD CLARK	4771 SW 2 TERRACE
XAdd				CORAL GABLES, FL 33134
Remove				
2) Change				· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				· · · · · · · · · · · · · · · · · · ·
Add				
Remove				-
5) Change			***************************************	
Add				
Remove				
δ) Change		_		
Add				
Remove				

	(Be specific)
	
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) as date this document was signed.	loption:	, if other than the
11/1	6/17	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment of ficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
11/16/17 Dated		
	Elave -	
51611dtd1¢		
· •	irector, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other co	
	ted fiduciary by that fiduciary)	, di t
	MARIA CLARK	
	(Typed or printed name of person signing)	·
	PRESIDENT	
	(Title of person signing)	