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2020 FEB -6 PH 2: 35

Amend

MAR 0 3 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: ADVANCED CLI	EANING TECHNOLOGY	INC
	MBER: P08000078167		
	les of Amendment and fee are si	abnutted for filling.	
	rrespondence concerning this ma		
	DANIA CUERVO		
		Name of Contact Perso	n
	ADVANCED CLEANING T	ECHNOLOGY INC	
		Firm/ Company	
	5816 consuello Di		
		Address	
	Holiday, 11, 34690		
		City State and Zip Cod	
D/	ANIA CUFRVO1990@GMAH.	COM	
	F-mail address: (to be u	sed for future annual report	notification)
For further informa	tion concerning this matter, pleas	se call:	
DANIA CUERVO		786	532-4022
DANIA CUERVO Name of Contact Person		Area Co	de & Daytime Telephone Number
	for the following amount made		
S35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	☐543.75 billing 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			Address Iment Section
		Division of Corporations	
		Clafon Building 2001 Executive Center Circle	
		Fallahassee, FL 32301	

Articles of Amendment

10

	Articles	of Incorporation of	,	
Advance	d Clea	ning Technology	INC	
P08000078167	or Corporation as Cus	Territoria de la companya de la comp		
7.11.00	(Docoment Nun	iber of Corporation (it known)		
			all ancien amandes	antle) to
Pursuant to the provisions of section 607, ats Articles of Incorporation:	,4006, Florida Statutes	s, this Florida Profit Corporation adopts the fo	mowing amendin	em(s) to
A. If amending name, enter the new n	ame of the corporatio	<u>m:</u>		
			The nev	
name must be distinguishable and con "Corp.," "Inc., " or Co.," or the design word "chartered," "professional associa	uitnoi Corp. Inc.	oration," "company," or "incorporated" or or "Co = 3 professional corporation name ition "P.A."	the abbreviation must contain the	11 L'
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)			2020 SEI	
istatung address <u>stati de, a i vai</u>	<u>(), (), (), ()</u>		020 FEB	
			ا المائية	Γ
			<u> </u>	П
D. If amending the registered agent at	nd/or registered offic	e address in Florida, enter the name of the	PH 2: 35	
new registered agent and/or the ne		<u>ldress:</u>		
Name of New Registered Agent	DANIA CUERVO		<u> </u>	
	5816 CONSUELO I)R		
	dm	enda street address)		
New <u>Rogistered Office Address:</u>	HOLIDAY	3. Florida, Florida	4690	
		(Car)	(Zip Code)	
New Registered Agent's Signature, if a I hereby accept the appointment as regis	changing Registered . tered agent - Lam tan	Agent: indiar with and accept the obligations of the po	osition.	
7	J 77 . Signature it	New Registered Agent, it changing	<u></u>	

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 me office title:

P = President, V = Vice President; T = Treasurer S = Secretary, D = Director, TR = Trustee; $C \neq Chairman$ or Clerk; $CEO \neq Chief$ 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 by PTO

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	PT	John Doe	
X Remove	V	Mike Jones	
<u>X</u> Add	SV	Sa <u>lly S</u> math	
Type of Action (Check One)	<u>Title</u>	Nance	<u>Addres</u> s
1) Change	11	FABIO FERNANDEZ	8604 BETTE LN STE 204
. 11	_		TAMPA, FL 33614
X Remove			
2) _ Change	P	DANIA CUERVO	5816 CONSUELO DR
X Add	·		HOLIDAY FL 34690
Remove			
3) Change			
Add			
Remove			
4) Change	·		
Add			
Remove			
51 Change	-		
_ Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary) — (Be specific)	
	_
	_
	_
· <u> · · · - · · · · · · ·</u>	
	_
	_
	_
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:	
(it not applicable, indicate NeA)	
	_
	_
	_
· · · · · · · · · · · · · · · · · · ·	

he date of each amendment(s) a	doption:	, if other than the
ite this document was signed.		
ffective date if applicable:		
	(no more than 90 days after amendment file a	late)
ote: If the date inserted in this to becoment's effective date on the D	plock does not meet the applicable statutory filing requirer epartment of State's records.	nents, this date will not be listed as the
doption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sha	archolder action and shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the afficient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The followed voting group entitled to vote separately on the amena	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	02/03/2020 Al	
Signature	A.	
(By a c	lirector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ited fiduciary by that fiduciary)	
	Dania Cuercio	
	(Typed or printed name of person signing)	-
	President.	
	(Title of person signing)	