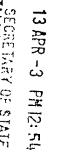
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone i	(f)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	e)
(Document Number)		
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

. TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	SEAMAR CLEANING INC	
· _		
DOCUMENT NUMBER: Pos	8000098532	
The enclosed Articles of Amendment and	fee are submitted for filing.	
Please return all correspondence concerning	ng this matter to the following:	
MARIA IN	GRED ROSARIO	-
7)	Name of Contact Person)	
SEAMAR CL	LEANING INC	_
*	(Firm/ Company)	
1720 EW 25 AVE		_
	(Address)	•
MIAMIFL 3314	5	_ :
(C	City/ State and Zip Code)	. •
For further information concerning this ma	atter, please call:	
MARIA INGRID ROSARIO	at (786) 232 - 5754 (Area Code & Daytime Telephone)	
(Name of Contact Person)	(Area Code & Daytime Telephone	Number)
Enclosed is a check for the following amount	unt:	•
MI \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	Certified Copy Cer (Additional copy is Cer enclosed) (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy enclosed)
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SEAMAR CLEANING INC

SEAMAR CLEANING	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
(Name of Corporation as currently filed with the l	Florida Dept. of State)
P08000098532	MOA
(Document Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	
If amending name, enter the new name of the corporation:	
N/B	The new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' ord "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	1720 SW 25 AVE
Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI FL 33145
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent GABRIEL F	•
1720 5W 25 (Florida str	AVE reet address)
New Registered Office Address: MIAMI (City)	, Florida 33/45
(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar to Signature of New Registered	with and accept the obligations of the position.

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	PT Jo	hn Doe	
X Remove	. <u>V</u> <u>M</u>	ike Jones	,
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>X</u> Change Add Remove	<u>PT</u>	GABRIEL A CLEMENTE	1720 SW 25 AVE MIAMI FL 33145
2) Change Add Remove	PT.	MARIA INGRIO ROSARIO	5077 NW 7 ST APT 1005
3) Change Add Remove			
4) Change Add Remove			
Change Add Remove		<u> </u>	
6) Change Add Remove			

L. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
PRTICLE 11
ARTICLE V
ARTICLE VI
ARTICLE VII
MARIA INGRID ROSARIO DELETED
GABRIEL A CLEMENTE ADDED
5077 NW 7 ST APT 1005
MIAMI FL 33126 DELETED
1720 SW 25 AVE
MIAMI FL 33145 ADDED
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 dae of each amendment(s) at	option:
Effective date if applicable:	
	(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 sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
☐ The amendment(s) was/were app must be separately provided for	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 f	or the amendment(s) was/were sufficient for approval
by	,,
	(voting group)
action was not required. The amendment(s) was/were adoptaction was not required.	oted by the incorporators without shareholder action and shareholder
Dated_ <i>03 - 28</i> Signature	Jana Jana Desano
(By a dy	ector, president or other officer Lif directors or officers have not been
,	by an incorporator - if in the hands of a receiver, trustee, or other court
appointe	d fiduciary by that fiduciary)
	MARIA INGRID ROSARIO
_	(Typed or printed name of person signing)
	DIRECTOR / PRESIDENT
-	(Title of person signing)