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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN **H2ONLY DISINFECTION SERVICES, CORP.**

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NOV 18 HOLD

EXAMINER

Articles of Amendment to Articles of Incorporation of

H2ONLY DISINFECTION SERVICES CORP.	
(Name of Corporation as currently filed with the F	orida Dept. of State)
P09000021889	
(Document Number of Corporation (il	(known)
Pursuant to the provisions of section 607.1006, Florida Statutes, that amendment(s) to its Articles of Incorporation:	nis Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
H2ONLY RENEWABLE CLEANING CORP.	
The new name must be distinguishable and contain the word "corpor abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." name must contain the word "chartered," "professional association,"	"Inc." or "Co". A professional corporation
B. Enter new principal office address, if applicable:	6020 NW 99th Ave
(Principal office address MUST BE A STREET ADDRESS)	Ste 214
	Doral FL 33178
C. Enter new mailing address, if applicable:	6020 NW 9946 Ave
(Mailing address MAY BE A POST OFFICE BOX)	DOZO NW THE AVE
	Ste 214
	Doral, FL 33178
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent:	
(Florida stre	
New Registered Office Address: (City)	, Florida(Zip Code)
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
	eent, If changing
Signature of New Registered Ag	gent, If changing

II AMEND	ING the Office	ers and/or Directors, pl	ease list all officers/d	irectors of the corpora	tion as you now want
(Our datable additional si	ase can index	ndicate the title(s), name up to 6 officers/directors	If you have more if	otticer/attrector, ian 6 officers/directors,	please list them on an
Title(s)		Name	<u>Ad</u>	dřese	
1)				talliting from the second	
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2)					
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3)				 	
<i></i>	•				
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4)			<u> </u>	Andrew State	
5)	,				
					•
6					
— <i>— — — — — — — — — — — — — — — — — — </i>	•				
HREMOV	ING an officer	and/or director, please	ist the title(s) and na	nc of the officer/direct	or to be removed:
Title(s)	Name		Title(s)	Name	
1)	,		4)		
2)			5		
••			_		

L. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	KCTR) WELE:		
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<u> </u>			<u>,</u>	

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)	
·	
•	
1 1	
no date of each amendment(s) adoption:	
• • • • · · · · · · · · · · · · · · · ·	
Tective date if applicable:	
(no more than 90 days after omendment file date)	
Saption of Amendment(s) (CHECK ONE)	
man a contract of the state of	.1
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	5)
•	
The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	mi
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voing group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder	25
action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11 17 7011	
1 1)	
Signature	<u> </u>
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator - if in the hands of a receiver, trustee, or other cour	t
appointed fiduciary by that fiduciary)	
RUBEN D. RIVE'S	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

November 17, 2011

Florida Department of State Division of Corporations Tallahassee, FL 32314

I, Ruben D. Rives, am the owner of H2Only Renewable Cleaning LLC, whose document number is L11000125676.

I hereby give permission and request for H2Only Disinfection Services Corp. to have its name changed to H2Only Renewable Cleaning Corp, as I am the sole owner of both entities.

Enclosed, please find Articles of Amendment requesting such name change. Should you need any additional information on this matter, please do not hesitate to contact.

Sincerely,

Ruben D. Rives

H2Only Renewable Cleaning Corp

305-592-1380