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2020 OCT 14 PM 4: 05
SECRETARY OF STATE

11120/20



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: LILIANA CLEAN	ING, INC.			
DOCUMENT NUMBER: P09000027514					
The enclosed Articles	of Amendment and fee are sub	bmitted for filing.			
Please return all corres	pondence concerning this mat	tter to the following:			
	LIZSEL R. CASTILLO				
		Name of Contact Person	1		
	LILIANA CLEANING, INC.				
•	Firm/ Company				
	12 SPRUCE ST				
•	Address				
	HOLLYWOOD, FL 33023				
	<del></del>	City/ State and Zip Code	`		
	LESYANYSOSA16@GMAI	L.COM			
-	E-mail address: (to be us	ed for future annual report	notification)		
For further information concerning this matter, please call:					
LIZSEL R. CASTILLO		at (	204-1351		
Name of Contact Person		Area Coc	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

FILED

LILIANA CLEANING, INC.	2020 OCT 14 PM 4: 05
( <u>Name of Corporati</u>	on as currently filed with the Florida Dept. of State)
P09000027514	SECRETARY OF STATE TALLAHASSES, FL
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Floridates Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
	The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word evation "P.A."
B. Enter new principal office address, if applicable	•
(Principal office address MUST BE A STREET ADE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	X)
<ul> <li>If amending the registered agent and/or register new registered agent and/or the new registered of</li> </ul>	
	orrice address.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent:
i nereny accept the appointment as registerea agent.	l am familiar with and accept the obligations of the position.
Signa	iture of New Registered Agent, if changing
Check if annlicable	

 $\square$  The amendment(s) is are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	LILIANA ESPINOSA	12 SPRUCE ST.
Add			HOLLYWOOD, FL 33023
X Remove			
2) Change	P	LIZSEL R. CASTILLO	12 SPRUCE ST
X Add			HOLLYWOOD, FL 33023
Remove 3 ) Change	_		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u> </u>
6) Change			
Add			
Remove			

Attach a	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
	<del>-</del>	
<del></del>		
lf an am provisi	mendment provides for an exchange, reclassification, or cancellation of issued shares, ions for implementing the amendment if not contained in the amendment itself:	
$\frac{\mathbf{j}(\mathbf{j}',\mathbf{j}')}{(\mathbf{j}\mathbf{j}')}$	not applicable, indicate N/A)	
····		

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	adoption:	, if other than the
date this document was signed.  Effective date if applicable:	W15 2020	
	(no more than 90 days after amendment file dat	lei
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requireme Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the a sufficient for approval.	mendment(s)
	pproved by the shareholders through voting groups. The follow or each voting group entitled to vote separately on the amendm	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
Dated 19	ns/2020	
selec	director, president or other officer – if directors or officers have ted, by an incorporator – if in the hands of a receiver, trustee, of inted fiduciary by that fiduciary)	
	LILIANA ESPINOSA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	